070113_Jester_Republic.pdf

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 March 2010 Form must be Typed Form must be Signed All blanks must be Filled

REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form KSONA-1, Certification of Compliance with the Kaneas Surface Owner Notification Act,

Check Applicable Boxes:	ared with this form.
Check Applicable Boxes: Oil Lease: No. of Oil Wells X Gas Lease: No. of Gas Wells Gas Gathering System: Saltwater Disposal Welf - Permit No.: Spot Location: feet from N / S Line feet from E / W Line Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE ** State Time Must Be Completed. Surface Pit Permit No.:	Effective Date of Transfer: 7/1/2013 KS Dept of Revenue Lease No.: 208281 Lease Name: JESTER REPUBLIC
Type of Pit: Emergency Burn Settling	Haul-Off Workover OR Drilling
Past Operator's License No. 5208 Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION P. O. BOX 4358, HOUSTON, TX 77210-4358 Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT New Operator's License No. 32864 New Operator's Name & Address: XTO ENERGY INC. 210 PARK AVENUE, SUITE 2350 OKLAHOMA CITY, OK 73102 Title: SR. OPERATIONS VICE PRESIDENT Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation
	and a special reality of preparation
is acknowledged as	is acknowledged as
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action:	the new operator of the above named lease containing the surface pit permitted by No.:
Date:	Date:
DISTRICT EPR////3	PRODUCTION NOV 0 8 2013 UIC //-8-/3
Mail to: Past Operator New Operat	1101

State The

Must Be Filed For All Wells

' Lease Name	JESTER REPUBLIC		* Location: 7 34 36WSW					
Well No.	API No. (YR DRLD/PRE '87)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Ges/INJ/WSW)	Well Status (PROD/TA'D/Abendoned			
		1250FSL	4030FĚL	GAS	ACTIVE			
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEUFWL					
		FSL/FNL	FEL/FWL					
		FSUFNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
	-	- FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
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		FSL/FNL	FEL/FWL		-			
		FSL/FNL	FEL/FWL		***************************************			
	***************************************	FSL/FNL	FEL/FWL	Particular 100 - 1	-			
		FSL/FNL	FEL/FWL		_			

A separate sheet may be attached if necessary

FELFWL

_ FEL/FWL

__ FEL/FWL

FELFWL

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WICHTA, KS

FSL/FNL

FSL/FNL .

FSL/FNL

FSLIFNL

[&]quot;When transferring a unit which consists of more than one lease please file a separate side two for each lease. If a lease covers more than one section please indicate which section each well is located.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1 July 2010 Form Must Be Typed Form must be Signed All blanks must be Filled

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

OPERATOR: License # 5208						
Name: EXXONMOBIL OIL CORPORA		T as Y March				
D O DOY 4979	County: Stevens					
Address 2:						
City: HOUSTON State: T						
Contact Person: ADAM SCOTT	the lease below:	the lease below:				
Phone: (713 431- 1859 F	T0348 - R036W: SEC 006 SW4 SEC 007 W2, SE4					
Email Address: adam.e.scott@exxonr	bil.com					
Surface Owner Information:						
Name: See Attached		attach an additional				
Address 1:		ace owner. Surtace				
Address 2:	county, and in the real estate property tax records of the c	sier or deeds for the county treasurer.				
City; State:	Zip:+					
Select one of the following:	he locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat n	nay De Suumateu.				
cwner(s) of the land upon which CP-1 that I am filing in connect	insas Surface Owner Notice Act (House Bill 2032), I have provided the following to to the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T- in with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) requi- address, phone number, fax, and email address.	1 or Form				
KCC will be required to send to	on to the surface owner(s). I acknowledge that, because I have not provided this informs information to the surface owner(s). To mitigate the additional cost of the KCC performs charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this for	orming this				
If choosing the second option, submit , form and the associated Form C-1, For	nyment of the \$30.00 handling fee with this form. If the fee is not received with this for a CB-1, Form T-1, or Form CP-1 will be returned.	rm, the KSONA-1				
hereby certify that the statements ma	herein are true and correct to the best of my knowledge and belief.					
Date: 6/15/2013 Signature of	perator or Agent:	anager				
API # :15189206310000		RECEIVED REPORATION COMMISS				

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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

CONSERVATION DIVISION WICHITA, KS

Surface Owners

AP#:	15189206310000	Lease Name:	JESTER RE	PUBLIC	 Well #:1	
Own	er Name: KINSER, STEPH	EN R & BRENDA	J			
	Address: 986 ROAD 16					
	City: HUGOTON	State:	KS Zip :	67951-5130		
Own	ner Name:					
	Address:					
	City:	State:	Zip	:		
	er Name: Address:					
	City:	State:	Zip:			
Owne	er Name:					
	Address:					
	City:	State:	Zip:			
	er Name: Address:					
	City:	State:	Zip:			

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