KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

070113_Keating_5.pdf
Form 7-1
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 Kansas Surface Owner Notification Act,

Check Applicable Boxes:	nitted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 7/1/2013			
X Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 202231			
Gas Gathering System:	Lease Name: KEATING			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T032S - R035W: SEC 005 S2, S2 NE4, S2 NW4 (NENE) (NWNE) (NENW) (NWNW)			
Entire Project: Yes No				
Number of Injection Wells **	County: Stevens			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE			
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.:	leet from N / S Line of Section			
(API No. If Drill Pit, WO or Haul)				
Type of Pit: Emergency Burn Settling	Haul-Off Workover > P Drilling			
Past Operator's License No	Contact Person: LAURIE KILBRIDE			
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone:713-431-1182 KCC \M/ICHITA			
P. O. BOX 4358, HOUSTON, TX 77210-4358	OFISAISOAS			
DEO MANACED/ACENT 9 ATTODNEY IN EACT	IIIN 1.8 2012			
Title:	Signature:			
	RECEIVED			
	Contact Person: BRENDA WALLER			
New Operator's License No. 32864 J	ON REDS TOTAL .			
New Operator's License No. 32864 J New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259			
	405 240 2250			
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259			
New Operator's Name & Address: XTO ENERGY INC. 210 PARK AVENUE, SUITE 2350	Phone:405-319-3259 Oil / Gas Purchaser:ONEOK FIELD SERVICES			
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	Phone: 405-319-3259 Oil / Gas Purchaser: ONEOK FIELD SERVICES Date: 05/31/2013 Signature: Douglas C. Schultze n authorization, surface pit permit # has been in Commission. This acknowledgment of transfer pertains to Kansas Corporation			
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	Phone: 405-319-3259 Oil / Gas Purchaser: ONEOK FIELD SERVICES Date: 05/31/2013 Signature: Douglas C. Schultze n authorization, surface pit permit # has been in Commission. This acknowledgment of transfer pertains to Kansas Corporation			
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Must Be Filed For All Wells

Lease Name:	KEATING	* Location: _ 5 32 35WSW				
Well No.	API No. (YR DRLD/PRE '67) 15189000810000 V	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
1		2310FSL	2970FEL	GAS	ACTIVE	
					_	
		FSL/FNL	FEL/FWL			
		FSUFNL	FEUFWL		_	
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEUFWL			
		FSL/FNL	FEL/FWL			
						
			FEL/FWL			
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	. Milliografica demandados, procederados relativos procederados demandades de contractos de la contracto de c	FSL/FNL				
		FSL/FNL	THE COMMERCIAL PROPERTY OF THE	ngantuu maan ahandan titoopin soora 10 oto otoo oo dhaan ili ahanda ahanda ahan oo o		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		1600 141101 117	
		FSL/FNL	FEL/FWL		KCC WICHITA	
		FSUFNL	FEL/FWL	An annual along a surrounding control of the sur	JUN 1 8 2013	
		ESI ÆNI	FEL/FWL		RECEIVED	

A separate sheet may be attached if necessary

^{*} 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.

Select the corresponding form being filed: C-1 (littent) CB-1	(Cathodic Protection Borehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #5208	Well Location:			
Name: EXXONMOBIL OIL CORPORATION				
Address 1: P. O. BOX 4358	County: Stevens			
Address 2:	Lease Name: KEATING Well #: 1			
City: HOUSTON State: TX Zip: 77210 + 4358	If filing a Form 1-1 for multiple wells on a lease, enter the legal description o			
Contact Person: ADAM SCOTT	the lease below:			
Phone: (713 431-1859 Fax: (713 431-1475	T032S - R035W: SEC 005 S2, S2 NE4, S2 NW4 (NENE) (NWNE) (NENW) (NWNW)			
Email Address: adam.e.scott@exxonmobil.com				
Surface Owner Information:				
Name: See Attached	When filing a Form 1.1 involving multiple surface owners, attach an additional			
Address 1:	sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the			
Address 2:	county, and in the real estate property tax records of the county treasurer.			
Cdy:+				
are preliminary non-binding estimates. The locations may be entered of Select one of the following: X certify that, pursuant to the Kansas Surface Owner Notice A	ak batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Act (House Bill 2032), I have provided the following to the surface			
owner(s) of the land upon which the subject well is of will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.			
	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this g fee, payable to the KCC, which is enclosed with this form.			
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP	g fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.			
I hereby certify that the statements made herein are true and correct to	o the best of my knowledge and belief.			
Date: 6/15/2013 Signature of Operator or Agent: M. Mucha	ad W.Multy Tille: Regional Land Manager			

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

KDOR #202231

API #:15189000810000

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Surface Owners

API#:	1518900	0810000	Lease Name: _	KEATII	NG		Well #: _1	
							v.	
Own	er Name:	HANSON, PATRIC	CIA LEE LIV TR					
	Address:	10000 ORCHID R	IDGE LN					
	City:	BONITA SPRINGS	State:	FL	Zip:	34135-2039		
	ner Name: Address:							
	City:		State:		Zip:			
	ner Name: Address:							
	City:		State:		Zip:			
	er Name: Address:							
	City:		State:		Zip:			
	er Name: Address:							
	City:		State:		Zip:			

KCC WICHITA
JUN 18 2013
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