KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

070113_Lambert_11.pdf
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 KBONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MURT he submitted with this form

Check Applicable Boxes: MUST be subm.	itled with this form.			
Oil Lease: No. of Oil Wells ** X Gas Lease: No. of Gas Wells 1 **	Effective Date of Transfer: 7/1/2013 KS Dept of Revenue Lease No.: 207368			
Gas Gathering System:	Lease Name: LAMBERT			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T031S - R035W: SEC 011 All			
Entire Project: Yes No				
Number of Injection Wells **	County: Stevens			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	•			
Proceedings of the Committee of the Comm	Production Zone(s): COUNCIL GROVE			
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.:				
Past Operator's License No. 5208	Contact Person: LAURIE KILBRIDE RECEIVED			
	KANSAS CORPORATION COMMISSION			
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 DE 131/2043 JUN 1 8 2013			
P. O. BOX 4368, HOUSTON, TX 77210-4358	Date: 05/31/2013 JUN 1 5 2013			
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole CONSERVATION DIVISION WICHITA, KS			
New Operator's License No. 32864 /	Contact Person: BRENDA WALLER			
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259			
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser:			
OKLAHOMA CITY, OK 73102	Date: 05/31/2013			
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u>			
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			
is acknowledged as	is acknowledged as			
the new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface pit			
Permit No.: Recommended action:	permitted by No.:			
Date:	Date:			
DISTRICT EPR//_4//3	PRODUCTION NOV 0 5 2013 uic 11-5-13			
Mail to: Past Operator New Operato	or District			

Side Two

Must Be Filed For All Wells

* Lease Name:	LAMBERT		* Location;_1	* Location: 11 31 36W NE				
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet i	Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	l Well Status SW) (PROD/TA'D/Abandoned			
2		3300FSL	660FEL	GAS	ACTIVE			
					_			
		FSL/FNL	FEL/FWL	V				
		FSUFNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL		-			
		FSL/FNL	FEL/FWL	715.				
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
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		FSL/FNL	FEL/FWL		DECEMBED.			
		FSL/FNL	FEL/FWL	К	RECEIVED ANSAS CORPORATION COMMISSIO			
		FSL/FNL	FEL/FWL		- JUN 1 8 2013 -			
	William Control of the Control of th	FSL/FNL	FEL/FWL	With any control of the control of t	CONSERVATION DIVISION WICHITA, KS			

_ ____FSL/FNL _____FEL/FWL

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.

OPERATOR: License #5298		
EVYONMOBIL OIL CORROBATION		Twp.31 S. R.35 Eas X West
Address 1: P. O. BOX 4358	County: Stevens	
Address 2:		Well #: 2
City: HOUSTON State: TX Zip: 772	40.00	wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	the lease below:	
Phone: (713 431-1859 Fax: (713 431-	75 T031S - R035W: SEC 011 All	
Email Address: adam.e.scott@exxonmobil.com		
Surface Owner Information:		
Name: See Attached	When filing a Form T-1 involvir	ng multiple surface owners, attach an additional
Address 1:	sheet listing all of the informat	tion to the left for each surface owner. Surface and in the records of the register of deeds for the
Address 2:	county, and in the real estate p	roperty tax records of the county treasurer.
City: State: Zip:	_+	
are preliminary non-binding estimates. The locations Select one of the following:	·	, , , , , , , , , , , , , , , , , , , ,
I certify that, pursuant to the Kansas Surface owner(s) of the land upon which the subject to CP-1 that I am filing in connection with this for form; and 3) my operator name, address, pho-	II IS Of Will be located: 1) a copy of the Form C : 2) if the form being filed is a Form C-1 or Form	1.1 Form CR.1 Form T.1 or Corm
KCC will be required to send this information	e owner(s). I acknowledge that, because I hav the surface owner(s). To mitigate the addition 30.00 handling fee, payable to the KCC, which	al cost of the KCC performing this
If choosing the second option, submit payment of the form and the associated Form C-1, Form CB-1, Form	10.00 handling fee with this form. If the fee is I I, or Form CP-1 will be returned.	not received with this form, the KSONA-1
hereby certify that the statements made herein are tr	and correct to the best of my knowledge and	bellef.
Date: 6/15/2013 Signature of Operator or Age	M. Michael McNutty	Regional Land Manager

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

AP#:	1518920	7200001	Lease	Name: _	LAMB	ERT		Well #: _2	
Own	er Name:	YOUNG, GALE							
	Add ress :	Attn: YOUNG, BE	TTY JO						
	City:	SATANTA		State:	KS	Zip:	67870-0067		
	er Name:								
	Address:								
	City:			State:		Zip:			
	er Name: Address:								
	City:			State:		Zip:			
Owne	or Name:								
•	Address:								
	City:			State:		Zip:			
	er Name:								
A	\ddress:								
	City:			State:		Zip:			

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS