KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form F-1
March 2010
Form must be Typed
Form must be Signed
All blanks must be Filed

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, MUST be submitted with this form. Check Applicable Boxes: Oil Lease: No. of Oil Wells 7/1/2013 Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: ___ Gas Gathering System: Lease Name: WAGNER Saltwater Disposal Well - Permit No.: _feetfrom N / N S Line Legal Description of Lease: feet from 🔲 E / 🔲 W Line T033S - R038W: SEC 016 S2 SEC 017 E2 Enhanced Recovery Project Permit No.:_ 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) feet from E / W Line of Section ☐ Bum Settling Type of Pit: Emergency Haul-Off Workover OP | Drilling Contact Person: __LAURIE KILBRIDE Past Operator's License No. __5208 / Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: _713-431-1182 DECEIVED KANSAS CORPORATION COMMISSION P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 Date: Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT IIIN 1 8 2013 Signature: Andrew D. Cole CONCERNATION DIVISION WICHITA, KS New Operator's License No. __32864 **BRENDA WALLER** Contact Person: . New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: ONEOK FIELD SERVICES 05/31/2013 OKLAHOMA CITY, OK 73102 Date:_ Title: SR. OPERATIONS VICE PRESIDENT Signature: <u>Douglas C. Schultre</u> Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #_ noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit. _ 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.: ____ Authorized Signature Authorized Signature DISTRICT -Mail to: Past Operator_ **New Operator**

	\mathcal{J}	Must Be	Filed For All Wells				
KDOR Leas * Lease Name				7 33 38W AL			
Codo (40)16		* Location: 17 33 38W NE					
Well No.	API No. (YR DRLOAPRE '67)	Footage from (i.e. FSL = Feet f	n Section Line from South Line)	Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)		
13		3293FNL	1390FWL	GAS	ACTIVE		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL	-			
		FSL/FNL	FEL/FWL		_		
		FSL/FNL	FEL/FWL				
		FSUFNL	FEL/FWL				
····		FSL/FNL	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				
		FSL/FNL	FEL/FWL				
	-	FSL/FNL	FEL/FWL		RECEIVED		
		FSL/FNL	FEL/FWL		CANSAS CORPORATION COMMISS		
		FSL/FNL	FEL/FWL		<u> </u>		

FEL/FWL _

.FSL/FNL _

CONSERVATION DIVISION WICHITA, KS

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 #5208	Well Location:
Name: EXXONMOBIL OIL CORPORATION	
Address 1: P. O. BOX 4358	· · · · · · · · · · · · · · · · · · ·
Address 2:	
City: HOUSTON State: TX Zip: 77210	4358 If filling a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	the lease below:
Phone: (713 431 186)9 Fax: (713 431-147	T033S - R038W: SEC 016 S2 SEC 017 E2
Email Address: adam.e.scott@exxonmobil.com	
Surlace Owner Information:	
Name: See Attached	
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:	
City: State: Zip:	
Select one of the following:	
owner(s) of the land upon which the subject wel	ner Notice Act (House Bill 2032), I have provided the following to the surface s or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this imber, fax, and email address.
KCC will be required to send this information to	owner(s). I acknowledge that, because I have not provided this information, the e surface owner(s). To mitigate the additional cost of the KCC performing this .00 handling fee, payable to the KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$3 form and the associated Form C-1, Form CB-1, Form T-1	00 handling fee with this form. If the fee is not received with this form, the KSONA-1 or Form CP-1 will be returned.
hereby certify that the statements made herein are true	nd correct to the best of my knowledge and belief.
Date: 6/15/2013 Signature of Operator or Agent:	M. Michael McNulty Title: Regional Land Manager

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

JUN 1 8 2013

Surface Owners

AP#:	1518921218	0001 L	Lease Name: _	WAGNER		-	Well #: <u>1-3</u>	
Owr	ner Name: PO	WELL, JEAN A	ETAL					
	Address: 502	N 11TH ST						
	City: GAF	RDEN CITY	State:	KS ZI	e: 67846-5214			
	ner Name:							
	Address:							
	City:		State:	Z	p:			
	ner Name: Address:							
	City:		State:	Zi _l):			
	er Name:							
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RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS