KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

070113_bulfemeyer.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 KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, Check Applicable Boxes: MUST be submitted with this form. Oil Lease: No. of Oil Wells Effective Date of Transfer: Gas Lease: No. of Gas Wells 204282 KS Dept of Revenue Lease No.: . Gas Gathering System:. Lease Name: WULFEMEYER Saltwater Disposal Well - Permit No.: ____ 11 Two. 32 R. _____feet from N / S Line Legal Description of Lease: _____feet from E / W Line T032S - R035W: SEC 011 NE4, NW4, S2 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.: _ _ feet from N / S Line of Section (API No. If Drill Pit, WO or Haul) feet from E / W Line of Section Type of Pit: Emergency ☐ Burn Settling Haul-Off Workover / Drilling Past Operator's License No. 5208 **LAURIE KILBRIDE** Contact Person: ___ Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 Date: __ **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: <u>Andrew D. Cole</u> New Operator's License No. 32864 **BRENDA WALLER** Contact Person: New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: KCC WICHITA 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: 05/31/2013 OKLAHOMA CITY, OK 73102 Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultze Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #___ has been 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 _ 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.: permitted by No.: ___ Authorized Signature

New Operator

DISTRICT

Mail to: Past Operator_

Side Two

Must Be Filed For All Wells

!	WULFEMEYER		44	1 32 35.W NE	
Lease Name:	THE PART BUILT PER		Location:	1 32 38.0 100	
Well No.	API No. (YR DRLD/PRE '87)	Foolage from (i.e. FSL = Feet fi	Section Line rom South Line)	Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
A1	15189000870000 /	2970FNL	2310Fy	GAS	ACTIVE
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		FSL/FNL	FEL/FWL		
	-	FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL	PM-Stragence	JUN 1 8 2013
		FSL/FNL			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.

OPERATOR: License # 5208			
Name: EXXONMOBIL OIL CORPORATION	ON	. NE Sec. 11 Twp.32 S. R. 35 EastX West	
Address 1: P. O. BOX 4358	County: Steve		
Address 2:	Leaso Name:	WULFEMEYER Well #: A1	
City: HOUSTON State: TX	Zip: 77210 ++4358	T-1 for multiple wells on a lease, enter the legal description of	
Contact Person: ADAM SCOTT	the lease belo	₩: W: SEC 011 NE4, NW4, S2	
Phone: (713 431- 1859 Fax:	713 431-1475 10325 - R036	W. SEC UTT NE4, NW4, S2	
Email Address: adam.e.scott@exxonmo	bil.com		
Surface Owner Information:			
Name: See Attached		orm T-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:		he real estate property tax records of the county treasurer.	
City: State:	Z(p:+		
owner(s) of the land upon which CP-1 that I am filing in connectio form; and 3) my operator name,	the subject well is or will be located: 1) a copy on with this form; 2) if the form being filed is a Fo address, phone number, fax, and email address on to the surface owner(s). I acknowledge that,	because I have not provided this information, the	
I certify that, pursuant to the Ka owner(s) of the land upon which CP-1 that I am filing in connectio form; and 3) my operator name. I have not provided this informati KCC will be required to send this.	the subject well is or will be located: 1) a copy on with this form; 2) if the form being filed is a Fo address, phone number, fax, and email address on to the surface owner(s). I acknowledge that,	of the Form C-1, Form CB-1, Form T-1, or Form rm C-1 or Form CB-1, the plat(s) required by this because I have not provided this information, the te the additional cost of the KCC performing this	
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

KCC WICHITA
JUN 18 2013

RECEIVED

Surface Owners

API#: 15189000870000 Lease Name: WULFEMEYER Owner Name: ADAMS, GREGORY L & DEBROAH K Address: 2667 ROAD W City: MOSCOW State: KS **Zip:** 67952 Owner Name: Address: City: State: Zip: Owner Name: Address: City: State: Zip: Owner Name: Address: City: State: Zip: **Owner Name:** Address: State: City: Zip:

> JUN 18 2013 RECEIVED

Well #: <u>A1</u>