RECEIVED AUG 20 2014 KCC WICHITA

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 Kansas Surface Owner Notification Act. MUST be submitted with this form.

8/15/2014
208201
No.: 208291
Sec. <u>22</u> Twp. <u>34</u> R. <u>37W</u> EXW
NW4 SEC 034 NE4, SE4, NW4
JNCIL GROVE
JNCIL GROVE
m N/ S Line of Section m E/ W Line of Section ☐ Drilling 人人
A WALLER
Manager and the second
lch
CY FITZWATER
OK FIELD SERVICES
ater
it #has been ment of transfer pertains to Kansas Corporation mit.
is acknowledged as
bove named lease containing the surface pit
Authorized Signature



Side Two

Must Be Filed For All Wells

KDOR Lea	se No.: 208291					
· Lease Nam	e: KNIER		* Location: 22 34 37WNW			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
23	15189205040000	1250FNL	1250FWL	GAS	ACTIVE	

		FSL/FNL	FEUFWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	Annual Control of the	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	do-15-10-1-13-19-14-1-10-10-10-10-10-10-10-10-10-10-10-10-1		
		FSL/FNL	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			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						

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.

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API#:15189205040000

## 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 (Intent) CB-1 (	(Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)				
OPERATOR: License # 32864 Name: XTO ENERGY INC.	Well Location: 				
Address 1: 210 PARK AVENUE, SUITE 2350	County:Stevens				
Address 2:	Lease Name: KNIER Well #:23				
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal description of				
Contact Person: BRENDA WALLER	the lease below: T034S - R037W: SEC 022 NW4 SEC 034 NE4, SE4, NW4				
Phone: ( 405 319-3259 Fax: ( )					
Email Address: BRENDA_WALLER@XTOENERGY.COM					
Surface Owner Information:           Name:         See Attached           Address 1:	When filing a Form T-1 involving multiple surface owners, attach an additional 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 county, and in the real estate property fax records of the county treasurer.				
the KCC with a plat showing the predicted locations of lease roads, tank 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 owner(s) of the land upon which the subject well is or will be the subject well in the subject well in the subject well is or will be the subject well in the s	ocated: 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				
Thave not provided this information to the surface owner(s). Ta	ncknowledge that, because I have not provided this information, the wher(s). To mitigate the additional cost of the KCC performing this				
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-	fee with this form. If the fee is not received with this form, the KSONA-1 I 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: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land				
Signal of Special Configuration of Special Con	1 DIV				

KDOR #208291

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### **Surface Owners**

API#: 151892	205040000	Lease Name: KNIER		_ Well # <u>23</u>
Owner Name:	KNIER, DONALD DEE	SR LIV TR		
Address:	449 ROAD 14			
City:	HUGOTON	State: KS	Zip: 67951-5126	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	