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,

Check Applicable Boxes:					
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.: 219337				
Gas Gathering System:	Lease Name: BREWER N				
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.:	T031S - R037W: SEC 026 NE4, W2, SE4				
Entire Project: Yes No					
Number of Injection Wells **	County: Stevens				
Fleki Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE				
** Side Two Must Be Completed.	Injection Zone(s):				
Side I WO Must be Completed.	rijaciion zono(s).				
Surface Pit Permit No.:	feet from N / S Line of Section				
(API No. II DTIII PII, WO or Haul)	feet from E / W Line of Section				
Tune of Pir: Emergency Burn Settling	Haul-Off Workover C Drilling				
Type of Pit: Emergency Burn Setting	(), ————————————————————————————————————				
Past Operator's License No. 5208	Contact Person: LAURIE KILBRIDE RECEIVED				
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 KANSAS CORPORATION COMMISSION				
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 IIIN 1 2 2012				
	JUN 1 8 2013				
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole CONSERVATION DIVISION WICHITA. KS				
22000	Contact Person: BRENDA WALLER				
New Operator's License No. 32864	Contact Person: 405-319-3259				
New Operator's Name & Address: XTO ENERGY INC.	Phone:				
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES				
OKLAHOMA CITY, OK 73102	Date: 05/31/2013				
Title: SR. OPERATIONS VICE PRESIDENT	Signaturo: Douglas C. Schultze				
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #has been				
noted appropriate or transfer. The above requires 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					
Commission records only and does not come; any ownership interest in the					
is acknowledged as	is acknowledged as				
the new operator and may continue to inject Ituids as authorized by	the new operator of the above named lease containing the surface pit				
Permit No.: Recommended action:	permitted by No.:				
Data	Date:				
Date:	Authorized Signature				
DISTRICT EPR 7/25//3 PRODUCTION 7.29.13 UIC 7-29-13					
Mail to: Past Operator New Operat	Mi-a-lah				

Side Two

y

Must Be Filed For All Wells

Lease Name:	BREWER		* Location; 26 31 37W.N E				
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/NJ/WSW)	Well Status (PROD/TA'D/Abandoned)		
13 INF	15189216180001	912FSL	2615FEL	GAS	ACTIVE		
		FSL/FNL					
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		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	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL	TATOMINE AND RESIDENCE OF A MANUAL CONTROL AND A MA	Months and the second		
		FSL/FNI	FEL/FWL				
		FSL/FNI	FEL/FWL		RECEIVED AS CORPORATION COMMISSION		
		FSL/FN/	FEL/FWL				
		FSUFN	FEL/FWL		JUN 1 8 2013 CONSERVATION DIVISION		
_		FSL/FN	LFEL/FWL		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	County: <u>Stevens</u>			
Address 2:	Lease Namo: BREWER Well #: 1-3 INF			
City: HOUSTON State: TX Zip: 77210 + 4358	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Contact Person: ADAM SCOTT Phone: (713 431- 859 Fax: (713 431-1475	T031S - R037W: SEC 026 NE4, W2, SE4			
Phone: (_			
Surface Owner Information:				
Name: See Attached	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			
Address 1:	 owner information can be found in the records of the register of deeds for the 			
Address 2:				
City:+ State: Zlp:+	_			
Select one of the following:	d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The Act (House Bill 2032), I have provided the following to the surface			
1.) . 4 st 1	MA KACSTAAR II S CANDY OLIDIA FORDI C). FORDI G.D.I. FURDI I'I, VI I'VIIII			
owner(s) of the land upon which the subject well is of while CP-1 that I am filing in connection with this form; 2) if the following and 3) my operator name, address, phone number, fa:	x, and email address.			
CP-1 that I am filing in connection with this form; 2) if the following form; and 3) my operator name, address, phone number, fat. I have not provided this information to the surface owner(s).	I acknowledge that, because I have not provided this information, the e-owner(s). To mitigate the additional cost of the KCC performing this ling fee, payable to the KCC, which is enclosed with this form.			
CP-1 that I am filing in connection with this form; 2) if the following form; and 3) my operator name, address, phone number, father in the surface owner (s). I have not provided this information to the surface owner (s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand	I acknowledge that, because I have not provided this information, the e-owner(s). To mitigate the additional cost of the KCC performing this ling fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-			
CP-1 that I am filing in connection with this form; 2) if the tole form; and 3) my operator name, address, phone number, fa: I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand. If choosing the second option, submit payment of the \$30.00 hand.	I acknowledge that, because I have not provided this information, the e-owner(s). To mitigate the additional cost of the KCC performing this lling fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.			
CP-1 that I am filing in connection with this form; 2) if the following and 3) my operator name, address, phone number, father in the surface owner (s). I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand if choosing the second option, submit payment of the \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form I hereby certify that the statements made herein are true and correction.	I acknowledge that, because I have not provided this information, the e-owner(s). To mitigate the additional cost of the KCC performing this lling fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.			

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

City:

API#: 15189216180001 L	ease Name: BREV	/ER	Well #:1-3 INF
Owner Name: LINTON, WILLIAM M Address: 550 ROHNERT PAR City: ROHNERT PARK		Zip: 94928-7953	
Owner Name: STEWART, KENNE Address: 2010 CHINN RD	TH W & DELMA F		
City: DENTON	State: TX	Zip : 76207-5105	
Owner Name: Address:		_	
City:	State:	Zip:	
Owner Name: Address:			
City:	State:	Zip:	
Owner Name: Address:			

State:

Zip:

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS