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.

Check Applicable Boxes:	7/1/2013
Oil Lease: No. of Oil Wells**	Effective Date of Iransier:
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 203247
Gas Gathering System:	Lease Name: C J RICKER EST
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	Legal Description of Lease:
feet from E / W Line	T026S - R034W: SEC 035 S2 T027S-R034W: SEC 002 N2
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	
Number of Injection Wells **	County: Haskell
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:(API No. II Drill Pit, WO or Haul) Type of Pit: Emergency Bum Settling	feet from N / S Line of Section feet from E / W Line of Section
Past Operator's License No. 5208	Contact Person: LAURIE KILBRIDE
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Audrew D. Cole
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: WGP-KHC LLC KCC WICHITA
OKLAHOMA CITY, OK 73102	Date: 05/31/2013 JUN 1 8 2013
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze
	RECEIVED
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been
	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	
is acknowledged as	is acknowledged as
the new operator and may continue to inject Iluids as authorized by	the new operator of the above named lease containing the surface pit
Permit No.: Recommended action:	permitted by No.:
Date:	Date:
7/8/12	PRODUCTION 7.9.13 UIC 7-9-13
DISTRICT EPR //0//3 Mail to: Past Operator New Operator	

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

Side Two

Must Be Filed For All Wells

Lease Name:	C J RICKER EST		* Location: 2 27 34WNE				
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fo	Section Line rom South Line)	Type of Well (OlVGas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned		
1		4950FSL	2310FEL	GAS	ACTIVE		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	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				
			FEL/FWL				
	Marie Carlos Car		FEL/FWL		KOO MICHITA		
			-		KCC WICHITA		
			FEL/FWL		JUN 1 8 2013		
			FEL/FWL		RECEIVED		
		FSL/FNL	FEUFWL				
		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 # 5208	Well Location:
Name: EXXONMOBIL OIL CORPORATION	
Address 1: P. O. BOX 4358	County: Haskeli
Address 2:	Lease Name: C J RICKER EST Well #: 1
City: HOUSTON State: TX Zip: 77210 ++	
Contact Person: ADAM SCOTT	the lease below: T026S - R034W: SEC 035 S2 T027S-R034W: SEC 002 N2
Phone: (713 431-1899 Fax: (713 431-1475	
Email Address: adam.e.scott@exxonmobil.com	
Surface Owner Information:	
Name: See Attached	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1:	
Address 2:	
City: State: Zip:+	
owner(s) of the land upon which the subject well i	ner Notice Act (House Bill 2032), I have provided the following to the surface sor will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form
CP-1 that I am filing in connection with this form; 2 form; and 3) my operator name, address, phone n) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
KCC will be required to send this information to the	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 \$30 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.
I hereby certify that the statements made herein are true a	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
API#:15081003500000 KD	OR #203247 KCC WICHITA

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

JUN 18 2013

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Surface Owners

API#: 15081003	3500000	Lease Name: _	C J RICK	KER E	ST	···	Well #: _1_	
Owner Name:	TLW LAND & CAT	TLE LP						
Address:	PO BOX 2410							
City:	OKLAHOMA CITY	State:	ОК	Zip:	73101			
Owner Name:								
Address:								
City:		State:		Zip:				
Owner Name: Address:								
City:		State:		Zip:				
Owner Name: Address:								
		•						
City:		State:		Zip:				
Owner Name: Address:								
City:		State:		Zip:				

KCC WICHITA
JUN 18 2013
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