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: MUST be automit	tied with this form.				
Check Applicable Bosss: Oil Lease: No. of Oil Wells	Effective Date of Transfer:				
Surface Pit Permit No.:(API No. II Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling					
Past Operator's License No	Contact Person: LAURIE KILBRIDE Phone: 713-431-1182 Date: 05/31/2013 Signature: Andrew D. Colc JUN 18 2013				
New Operator's License No. 32864 New Operator's Name & Address: XTO ENERGY INC. 210 PARK AVENUE, SUITE 2350 OKLAHOMA CITY, OK 73102	Contact Person: BRENDA WALLER RECEIVED Phone: 405-319-3259 Oil / Gas Purchaser: ONEOK FIELD SERVICES Date: 05/31/2013				
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u>				
Acknowledgment of Transfer: The above request for transfer of injection and noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation				
is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action:	is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.:				
1	PRODUCTION 7.22.13 UIC 7-22-/3				
Mail to: Past Operator New Operato	or District				

Side Two

y

Must Be Filed For All Wells

Lease Name	CAREY		Location: 11	1 28 34WNW		
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)	
2	15081200430000 /	3960FSL	3960FEL	GAS	ACTIVE	
	* ************************************	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	-		
		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				
		FSL/FNL				
		FSL/FNL			KCC WICHIT	
			FEUFWL		JUN 1 8 2013	
		ECI STAN	551 5740		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 KSOMA-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	NW Sec. 11 Twp.28 S. R. 34 Eas X West				
Address 1: P. O. BOX 4358	County: Haskell				
Address 2:	Lease Name: CAREY Well #: 2				
City: HOUSTON State: TX Zip: 77210 + 4358	If filing a Form T-1 for multiple wells on a lease, enter the legal description				
Contact Person: ADAM SCOTT	the lease below: T028S - R034W: SEC 011 NE4, E2 SE4, W2 SE4, W2				
Phone: (713 431- \859 Fax: (713 431-1475	19200 - 1997H: SEC VII NET, EZ 3E4, WZ 3E4, WZ				
Email Address: adam.e.scott@exxonmobil.com	-				
Surface 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:	d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.				
owner(s) of the land upon which the subject well is or will b CP-1 that I am filing in connection with this form; 2) if the for form; and 3) my operator name, address, phone number, fax					
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the 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 choosing the second option, submit payment of the \$30.00 handle form and the associated Form C-1, Form CB-1, Form T-1, or Form C	ing fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.				
I hereby certify that the statements made herein are true and correc	t to the best of my knowledge and belief.				
Date: 6/15/2013 Signature of Operator or Agent:	chael McNulty Tille: Regional Land Manager				
API # :15081200430000 KDOR #20073	KCC WICHITA				

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

JUN 1 8 2013

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Surface Owners

AP#: 15081200430000 Lease Name: CAREY

Owner Name: KING, BILL A & DEWEES KING, CHRISTOPHER R									
Address:	ddress: 1102 MOCKINGBIRD LANE								
City:	GARDEN CITY	State:	KS	Zip:	67846				
Owner Name: Address:									
City:		State:		Zip:					
Owner Name:									
Address:									
City:		State:		Zip:					
Owner Name:									
Address:									
City:		State:		Zip:					
Owner Name: Address:									
Citv:		State:		<i>7</i> in:					

KCC WICHITA
JUN 18 2013
RECEIVED

_____ Well #: _2____