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

Check Applicable Boxes:	
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 7/1/2013
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 203246
Gas Gathering System:	Lease Name: CARL J RICKER EST
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.:	T027S - R034W: SEC 001 All
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.:	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover OF Drilling
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	05/04/0042
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Date:
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
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 a noted, approved and duty 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	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.: Recommended action:	permitted by No.:
Date:	Date:
Authorized Signature /	Authorized Signature
DISTRICT EPR 7/11/13	PRODUCTION 7. 22 . 13 UIC 7-22-13
1 / /	or District

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

Must Be Filed For All Wells

KDOR Lease No.: 203246

* Lease Name:	CARL J RICKER EST	*Location: 1 27 34WSE			
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)
1	15081003480000 🗸	2508 1980FSL	2501 1980FEL	GAS	ACTIVE
	•				
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	######################################	
		FSUFNL	FEUFWL		
		FSL/FNL	FEL/FWL		
		FSUFNL	FEL/FWL	****	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSUFNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		KCC WICHITA
			FEL/FWL		JUN 1 8 2013
		FSL/FNL		A STATE OF THE STA	RECEIVED

A separate sheet may be attached if necessary

[&]quot;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	SE Sec. 1 Twp.27 S. R. 34 East X West		
Address 1: P. O. BOX 4358	County: Haskell		
Address 2:	Lease Name: CARL J RICKER EST Well #: 1		
City: HOUSTON State: TX Zip: 77210 + 4358	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: ADAM SCOTT	the lease below: T027S - R034W: SEC 001 All		
Phone: { 713 431. 1859 Fax: (713 431-1475			
Email Address: adam.e.scott@exxonmobil.com			
Surface Owner Information:			
Name: See Attached	When tiling a Form 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:	county, and in the real estate property tax records of the county treasurer.		
City States Time .			
City: State: Zip:+			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered Select one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax.	nodic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Act (House Bill 2032), I have provided the following to the surface located: 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 and email address. acknowledge that, because I have not provided this information, the paymer(s). To mitigate 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

KDOR #203246

API #:15081003480000

KCC WICHITA

JUN 18 2013

RECEIVED

Surface Owners

API#: 15081003480000	Lease Name: _	CARL J RICKER EST	Well #: _ 1
Owner Name: HERITAGE FI	EEDERS LP		
Address: 1506 RD 30			
City: SUBLETTE	State:	KS Zip: 67877	
Owner Name: Address:			
City:	State:	Zip:	
Owner Name: Address:			
City:	State:	Zip:	
Owner Name: Address:			
City:	State:	Zip:	
Owner Name: Address:			
City:	State:	Zip:	

JUN 18 2013 RECEIVED