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: MUST be sub	mitted with this form.
Oil Lease: No. of Oil Wells X Gas Lease: No. of Gas Wells Gas Gathering System: Saltwater Disposal Well - Permit No.: Spot Location: feet from N / S Line feet from E / W Line Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE ** Side Two Must Be Completed.	Effective Date of Transfer: 7/1/2013 KS Dept of Revenue Lease No.: 220114 Lease Name: DOERKSEN SE Sec. 27 Twp. 28 R. 34W E X W Legal Description of Lease: T028S - R034W: SEC 027 N2, S2 County: Haskell Production Zone(s): CHASE Injection Zone(s):
Surface Pit Permit No.:(API No. II Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	teet from
Past Operator's License No	Contact Person: LAURIE KILBRIDE Phone: 713-431-1182 Date: 05/31/2013 Signature: Andrew D. Cole KCC WICHIT
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 JUN 1 8 2013
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duty recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	n 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:	the new operator of the above named lease containing the surface pit permitted by No.: Date:
DISTRICT EPR	Authorized Signature PRODUCTION 7-24-13 ator District
,	

Side Two

Must Be Filed For All Wells

Lease Name:	DOERKSEN		* Location; 27 28 34W%				
Well No.	API No. (YR DRLD/PRE '67)	Footagê from (i.e. FSL = Feet f	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)		
12 INF		1250FSL	1250FEL	GAS	ACTIVE		
							
W. danner		FSL/FNL	FEL/FWL				
		FSUFNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL					
			FEUFWL				
			FEI /FWI				
		FSDFNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
troviriani dilakera vi subrevue u vuodamadi	makko dikeriak waa wake araka akinda wake da ka wake wake wake wake birika kinda wake wake birika kinda wake a	FSL/FNL	FEL/FWL	National disease translations of the control of the	Statistics have about an extension in house to a course to be contracted by the contract of the course of the cour		
		FSL/FNL	FEL/FWL				
thington is a series committee	Brown billion of the control of the	, "FSL/FNL	FEUFWL	to be some	ed and the technique for the company's spacing 1 or 1 in the property against the com-		
····		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		KCC WICHI		
			FEL/FWL		JUN 1 8 2013		
			FEDETAL		RECEIVED		

A separate sheet may be attached if necessary

FSL/FNL

FEL/FWL _

^{*} 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

RECEIVED

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.

API # :1508120874000	0 кд	OOR #220114	KCC WICHI	ГА	
Date: 6/15/2013	_ Signature of Operator or Agent:	M. Michael McNulty	Regional Land Manager		
	itements made herein are true a				
If choosing the second op form and the associated F	tion, submit payment of the \$30 orm C-1, Form CB-1, Form T-1,	.00 handling fee with th or Form CP-1 will be re	nis form. If the fee is not received with this form, the KS	ONA-1	
KCC will be requir	ed to send this information to th	ne surface owner(s). To	ge that, because I have not provided this information, the mitigate the additional cost of the KCC performing this ble to the KCC, which is enclosed with this form.	; ;	
owner(s) of the lar CP-1 that I am filir	nd upon which the subject well i	is or will be located: 1) : ?) if the form being filed	Bill 2032), I have provided the following to the surface a copy of the Form C-1, Form CB-1, Form T-1, or Form is a Form C-1 or Form CB-1, the plat(s) required by this address.	1	
the KCC with a plat showing	ng the predicted locations of leasing estimates. The locations may	se roads, tank batteries,	tion Borehole Intent), you must supply the surface owns pipelines, and electrical lines. The locations shown on a C-1 plat, Form CB-1 plat, or a separate plat may be sub	he plat	
Слу:	State: Zip:	·			
Address 2:		county	county, and in the real estate property tax records of the county trea		
Name: See Attached Adultess 1:		sheet h	When filing a Form 1.1 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		
Surface Owner Information		110			
Email Address: adam.e.s	cott@exxonmobil.com				
Phone: 713 431- 185	713 431- 1859 Fax: (713 431-1475		the lease below: T0288 - R034W: SEC 027 N2, S2		
Contact Person: ADAM SCOTT		the lea			
	State:Zip:77210 +	1050	a Form 1-1 for multiple wells on a lease, enter the legal desc		
		•	Name: DOERKSEN Well #: 12 INF		
	58			K_ West	
			ocation:	.	
OPERATOR: License #	/				

Surface Owners

API#:	15081208740000	Lease Name: _	DOERKSEN		Well #: 1-2 INF
Own	ner Name: CLAWSON LAND	PARTNERSHIP			
	Address: PO BOX 279				
	City: PLAINS	State:	KS Zip:	67869	
Owi	ner Name:				
	Address:				
	City:	State:	Zip:		
	ner Name: Address:				
	City:	State:	Zip:		
	er Name:				
	Address:				
	City:	State:	Zip:		
	er Name:				
•	Address:				
	City:	State:	Zip:		

JUN 18 2013
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