#### 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 submit	itted with this form.			
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.:221391			
Gas Gathering System:	Lease Name: _ EMMA HOPKINS			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	NW sec. 34 Twp. 30 R. 33W EXW			
teet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T030S - R033W: SEC 034 N2, SW4, SE4			
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.:	tt □n (□n : 10 ::			
(API No. If Drill Pit, WO or Haul)	feet from N / S Line of Section			
Toront Dia College Col	feet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling			
Past Operator's License No	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 KCC WICHIT			
210 PARK AVENUE, SUITE 2350				
	JOIN 1 0 ZUIJ			
OKLAHOMA CITY, OK 73102	RECEIVED			
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #has been			
noted, approved and duly recorded in the records 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	above injection well(s) or pit permit.			
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			
·	PRODUCTION 7:24.13 UIC 7-24-13			
Mail to: Past Operator New Operato	or District			

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	No.: 221391					
Lease Name:	EMMA HOPKINS	* Location: 34 30 33WNW				
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
2	15081210390000	1250FNL	1250FWL	GAS	ACTIVE	
		FSL/FNL	FEVFWL			
			FEL/FWL			
			FEL/FWL		_	
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		_	
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		FSL/FNI	FEL/FWL		RECEIVED	
		FSL/FNL	FEL/FWL			

A separate sheet may be attached if necessary

<sup>\*</sup> 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	<u>NW</u> Sec. 34 Twp.30 S. R. 33Eas(X) West
Aridress 1: P. O. BOX 4358	County: Haskell
Address 2:	Lease Name: EMMA HOPKINS Well #: 2
City: HOUSTON State: TX Zip: 77210 + 4358	
Contact Person: ADAM SCOTT  Phone: { 713   431   859   Fax: { 713   431-1475   Fax: { 713   431-1475	the lease below: T030S - R033W: SEC 034 N2, SW4, SE4
	, ,
Email Address: adam.e.scott@exxonmobil.com	
Surface Owner Information:	
Name: See Attached	When tiling 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
Address 1:	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: State: Zip:+	
the KCC with a plat showing the predicted locations of lease roads, ta	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.
the KCC with a plat showing the predicted locations of lease roads, to 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,  I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of the surface	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 heing 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 owner(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

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### **Surface Owners**

Owner Name: NATION PROPERTIES LLC Address: 8901 N LEWIS AVE.  City: KANSAS CITY  State: MO Zip: 64157  Owner Name: Address: City: State: Zip:  Owner Name: Address: City: State: Zip:  Owner Name: Address: City: State: Zip:	API#:_	15081210390000	Lease Name: _	ЕММА НО	PKINS	Well #:2	
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