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:	180 WAN INS IOTA.		
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.: 201979		
Gas Gathering System:	Lease Name: ILLIIS BANKERS		
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.:	T028S - R034W: SEC 012 W2 NW4, E2 NW4, NE4, 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):		
	rijodion zoro(s).		
Surface Pit Permit No.:	leet from N / S Line of Section		
(API No. II Drill Pit, WO or Haul)	leet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover DP 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 KCC \A4CLUTA		
RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Date: KCC WICHITA Signature: Andrew D. Cole		
Title: NOO MANAGENAGENT & ATTOMETING ACT	JUN 1 8 2013		
New Operator's License No. 32864 /	Contact Person: BRENDA WALLER RECEIVED		
New Operator's Name & Address: XTO ENERGY INC.	Phone:405-319-3259		
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES		
OKLAHOMA CITY, OK 73102	Date: 05/31/2013		
Title: _ SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze		
INO: SR. OFERATIONS VICE PRESIDENT	Signature. Designar V. Demanye		
	and the signature and are all possessions.		
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	anove allection wents) of 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:		
	PRODUCTION 7.22.13 UIC 7-22-13		
DISTRICT EPRNew Operator New Operator			
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Must Be Filed For All Wells

Lease Name:	ILLIIS BANKERS		* Location:	2 28 34W <i>SE</i>	
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
1	15081002700000	2440 2640FSL	2440 2640FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		_
		FSL/FNL	FEL/FWL		_
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	AMERICA -	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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			FEL/FWL		KCC WICHITA
			FEL/FWL		
			FEL/FWL		- JUN 1 8 2013
Particular and the second seco			FEL/FWL	THE IDEA.	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 KSONA-1 hay 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 CORPORATIO	N	<i>SE</i> _Sec.12Twp.28S. R.34Eas X West		
Address 1: P. O. BOX 4358	County: Hask	sell		
Address 2:	Lease Name:	ILLIIS BANKERS Well #: 1		
City: HOUSTON State: TX	Zip: 77210 + 4358 # filing a Form	n T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: ADAM SCOTT		the lease below: T028S - R034W: SEC 012 W2 NW4, E2 NW4, NE4, SW4, SE4		
Phone: { 713 431-\859 Fax:	713 431-1475 10265 - R034	4W: 3EC 012 W2 NW4, E2 NW4, NE4, 3W4, 3E4		
Email Address: <u>adam.e.scott@exxonmob</u>	il.com			
Surface Owner Information:				
Name: See Attached		Form 1-1 involving multiple surface owners, attach an additional		
Address 1:		If of the information to the left for each surface owner. Surface tion can be found in the records of the register of deeds for the		
Address 2:		the real estate property tax records of the county treasurer.		
City: State:	_ Zip:+			
	the subject well is or will be located: 1) a copy	032), I have provided the following to the surface		
CP-1 that I am filing in connection form; and 3) my operator name, a I have not provided this informatic KCC will be required to send this	ddress, phone number, fax, and email address on to the surface owner(s). I acknowledge that, information to the surface owner(s). To mitiga	orm C-1 or Form CB-1, the plat(s) required by this s. because I have not provided this information, the additional cost of the KCC performing this		
CP-1 that I am filing in connection form; and 3) my operator name, a I have not provided this information KCC will be required to send this task, I acknowledge that I am being the choosing the second option, submit par	address, phone number, fax, and email address on to the surface owner(s). I acknowledge that, information to the surface owner(s). To mitiga ng charged a \$30.00 handling fee, payable to t	orm C-1 or Form CB-1, the plat(s) required by this s. because I have not provided this information, the ate the additional cost of the KCC performing this the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1		
CP-1 that I am filing in connection form; and 3) my operator name, a I have not provided this information KCC will be required to send this task, I acknowledge that I am being the second option, submit pay form and the associated Form C-1, Form	address, phone number, fax, and email address on to the surface owner(s). I acknowledge that, information to the surface owner(s). To mitigate owner(s) as \$30.00 handling fee, payable to the surface owner of the \$30.00 handling fee with this form	orm C-1 or Form CB-1, the plat(s) required by this s. because I have not provided this information, the ate the additional cost of the KCC performing this he KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 d.		
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

RECEIVED

JUN 18 2013

Surface Owners

API#: 15	081002700000	Lease Name: _	ILLIIS	BANKERS	Well	#:
	Name: GREGG, LOU AN					
Add	dress: 4129 57TH DRIV	E				
	City: UDALL	State:	KS	Zip: 67146		
	Name: DAUGHERTY FA dress: 16240 TARRYTO					
	City: BROOKFIELD	State:	WI	Zip: 53005		
Owner I	Name: dress:					
	City:	State:		Zip:		
Owner N	lame: Iress:					
	City:	State:		Zip:		
Owner N	łame: iress:					
	City:	State:		Zip:		

KCC WICHITA JUN 18 2013 **RECEIVED**