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 subn	nitted with this form.
Oll Lease: No. of Oil Wells	Effective Date of Transfer: 7/1/2013 KS Dept of Revenue Lease No.: 202465 Lease Name: LUCAS
Surface Pit Permit No.: (API No. If Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	leet from N / S Line of Section leet from E / W Line of Section Haul-Off Workover D
Past Operator's License No	Contact Person: LAURIE KILBRIDE Phone: 713-431-1182 KCC WICHITA Date: 05/31/2013 JUN 1 8 2013 Signature: Andrew D. Cole RECEIVED
	Contact Person: BRENDA WALLER Phone: 405-319-3259 Oil / Gas Purchaser: ONEOK FIELD SERVICES Date: 05/31/2013 Signature: Douglas C. Schultze authorization. surface pit permit #
Commission records only and does not convey any ownership interest in the	•
Authorized Signature	PRODUCTION 7.22.13 UIC 7-22-13

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

Must Be Filed For All Wells

DOR Lease	No.: 202465				
ease Name:	LUCAS		Location: 2	1 28 34W S E	
Well No.	API No. (YR ORLD/PRE '67)	Footage from (i.e. FSL = Feet (n Section Line from South Line)	Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandon
	15081002800000 🗸	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		
		FSL/FNL	FEUFWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSUFNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	- Calabara	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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	-		FEL/FWL		KCC WICHITA
			FEL/FWL		J <u>UN 1 8 2013</u>
			FEL/FWL		
	The state of the s	FSL/FNL	FEL/FWL		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

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.

5208					
OPERATOR: License # 5208 Name: EXXONMOBIL OIL CORPORAT	Well Location:	24 00 T			
Address 1: P. O. BOX 4358		SE Sec. 21 Twp.28 S. R. 34 Eas X West			
Address 2:	, , , , , , , , , , , , , , , , , , ,				
City: HOUSTON State: TX		LUCAS Well #; 2			
Contact Person: ADAM SCOTT	the lease below	I-1 for multiple wells on a lease, enter the legal description of c			
Phone: (713 431- 185 9 Fax	desired to the commence of the	V: SEC 021 SW4, NW4, E2			
Email Address: adam.e.scott@exxonmo					
Surface Owner Information:					
Name: See Attached	When filing a Fo	orn 1.1 iovolving multiple surface owners, attach an additional			
Address 1:	sheet listing all (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	to real estate property tax records of the register of deeds for the te real estate property tax records of the county treasurer.			
City: State:	7ip:+				
owner(s) of the land upon which	insas Surface Owner Notice Act (House Bill 203 i the subject well is or will be located: 1) a copy on with this form; 2) if the form being filed is a Form	of the Form C.1. Form CR.1. Form T.1. or Form			
form; and 3) my operator name.	address, phone number, fax, and email address.	To For Com OB-1, the places required by this			
KCC will be required to send thi	on to the surface owner(s). I acknowledge that, b s information to the surface owner(s). To mitigate ing charged a \$30.00 handling fee, payable to the	the additional cost of the KCC nerforming this			
If choosing the second option, submit pa form and the associated Form C-1, Form	nyment of the \$30.00 handling fee with this form. o CB-1. Form T-1, or Form CP-1 will be returned.	If the fee is not received with this form, the KSONA-1			
I hereby certify that the statements made	e herein are true and correct to the best of my kno	owledge and belief.			
Date: 6/15/2013 Signature of C	perator or Agent: M. Michael McNulty	Title: Regional Land Manager			
API # :15081002800000	KDOR #202465	KCC WICHITA			

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

JUN 18 2013

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Surface Owners

City:

API#:	15081002800000	Lease Name:	LUCAS	3		
Own	er Name: LUCAS, RW&C	ATHY ETAL				
	Address: PO BOX 873					
	City: SUBLETTE	State:	KS	Zip: 67877		
Owner Name: LUCAS, WESLEY W TRUST LUCAS, WESLEY & VELMA TR Address: 2703 ROCK ROAD						
	City: GARDEN CITY	State:	KS	Zip: 67846		
	er Name: LUCAS, GERALD Address: PO BOX 434 City: SUBLETTE	& BEULAH State:	KS	Zip: 67877		
	·					
	er Name: SPRUNGER, LOG Address: 443 RD 100	AN ETAL				
	City: SATANTA	State:	KS	Zip: 67870		
Owne	er Name:					
1	Address:					

State:

Zip:

JUN 18 2013
RECEIVED

__ Well #: __2