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:	ted 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.: 220548			
Gas Gathering System:	Lease Name: BROWN			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
teet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T025S - R034W: SEC 023 All			
Entire Project: Yes No				
Number of Injection Wells **	County: Finney			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE			
** Side Two Must Be Completed.	Injection Zone(s):			
Side into mast by verifical	Injustion Estate).			
Surface Pit Permit No.:	feet from N / S Line of Section			
(API No. If Drill Pit, WO or Haul)	leet from E / W Line al Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover (Drilling			
***************************************	LAURIE KILBRIDE			
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 RECEIVED			
Titta: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole KANSAS CORPORATION COMMISSION			
Title:	HIM 1 9 2012			
	Contact Person: BRENDA WALLER CONSTRUCTION PROFESSION			
New Operator's License No	Contact Person: BRENDA WALLER CONSERVATION DIVISION WICHITA, KS			
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			
	Signature: Douglas Q. Schultze			
Title: SR. OPERATIONS VICE PRESIDENT	Signature			
	authorization surface pil permit # has been			
Acknowledgment of Transfer: The above request for transfer of injection	Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the	above mijection wents) of pit permit.			
is acknowledged as	is acknowledged as			
	the new operator of the above named lease containing the surface pit			
the new operator and may continue to inject fluids as authorized by				
Permit No.: Recommended action:	permitted by No.:			
Date:	Date:			
DISTRICT EPR	PRODUCTION 8.15.43 UIC 8-15-13			
Mail to: Past Operator New Operator	ator District			

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

Side Two

	V	Must Be i	Filed For All Wells		
KDOR Lease	e No.:				
Lease Name	BROWN		Location:_23	25 34WS <u>F</u>	
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
2931	15055214130001	1250FSL	1250FEL_	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
<u> </u>		FSL/FNL	FEL/FWL		
	_	FSL/FNL	FEL/FWL		
	_	FSL/FNL	FEL/FWL		_
		FSL/FNL	FEL/FWL		_
	_	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		_
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	_	FSL/FNL	FEL/FWL		_
	_	FSL/FNL	FEL/FWL		
			FEL/FWL		_
		FSL/FNL	FEL/FWL		
		FSL/FNL			
		FSL/FNL	FEL/FWL	n o " o o o o o o o o o o o o o o o o o	
aktilina antara era era eta interioria interioria interioria antara era era era era era era era era era			FEL/FWL		
					MBDD (Contradical Contradical
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		FSL/FNL			RECEIVED
			FEL/FWL	KANS	AS CORPORATION COMMISSION
-			FEL/FWL		JUN 1 8 2013
		FOLICAL			CONSERVATION DIVISION WICHITA, KS

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.

Select the corresponding form being file	ed: C-1 (Intent) CB-1 (Cathodic Protection Borehole I	rten) XT-1 (Transfer) CP-1 (Plugging Application)
OPF RATOR: License #5208	Well Location:	Sec. 23 Twp.25 S. R. 34 Eas X West
Name: EXXONMOBIL OIL CORPORATION	MANAGE TO STATE OF THE STATE OF	
Address 1: P. O. BOX 4358		VN Well #: 29-31
Address 2:		
Offy: HOUSTON State: TX	MA 14344 (144)W	r multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	TAGES DOLLWISE	C 023 All
Phone: { 713 431-1859 Fax: {	713 431-1475	
Email Address: <u>adam.e.scott@exxonmob</u> i	il.com	
Surface Owner Information:		
Name: See Attached	When filing a Form 1	1 involving multiple surface owners, attach an additional e information to the left for each surface owner. Surface
Address 1:	owner information ca	in be found in the records of the register of deeds for the
Address 2:	county, and in the re-	al estate property tax records of the county freasurer.
City: State:	_ Zip:+	
Select one of the following: X Certify that, pursuant to the Kar	nsas Surface Owner Notice Act (House Bill 2032),	I have provided the following to the surface
CP-1 that I am filing in connection	the subject well is or will be located: 1) a copy of the with this form: 2) if the form being filed is a Form Condress, phone number, fax, and email address.	e Form C-1, Form CB-1, Form 1-1, or Form -1 or Form CB-1, the plat(s) required by this
— KCC will be required to send this	on to the surface owner(s). I acknowledge that, beca information to the surface owner(s). To mitigate th ng charged a \$30.00 handling fee, payable to the KC	e additional cost of the KCC penorning this
If choosing the second option, submit pa- form and the associated Form C-1, Form	yment of the \$30.00 handling fee with this form. If (CB-1, Form T-1, or Form CP-1 will be returned.	the fee is not received with this form, the KSONA-1
I hereby certify that the statements made	herein are true and correct to the best of my knowle	edge and belief
Date: 6/15/2013 Signature of O	perator or Agent:	Tille: Regional Land Manager
API#:16055214130001	KDOR #220548	RECEIVED KANSAS CORPORATION COMMISSI

JUN 1 8 2013

Surface Owners

API#:	15055214130001	Lease Name: _	BROWN		Well #:	2931
	ner Name: J O CATTLE COI	MPANY INC				
	Address: PO BOX 7					
	City: HOLCOMB	State:	KS Zip:	67851-0007		
Ow	ner Name: Address:					
	City:	State:	Zip:			
Owi	ner Name: Address:					
	City:	State:	Zip:			
Owi	ner Name: Address:					
	City:	State:	Zip:			
Owi	ner Name: Address:					
	City:	State:	Zip:			

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS