#### 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	ed with this form.		
Check Applicable Boxes:  Oil Lease: No. of Oil Wells**	Effective Date of Transfer:		
X Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 220118		
Gas Gathering System:	Lease Name: BROWN		
Saitwater Disposal Well - Permit No.:	Lease Name:		
Spot Location:			
spot cocation: feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T025S - R034W: SEC 014 All		
Entire Project: Yes No			
Number of Injection Wells**	County: Finney Production Zone(s): CHASE		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE			
** Side Two Must Be Completed.	Injection Zone(s):		
Side (No Must be complete)	HJOHOT EUROPP		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. II Drill Plt, WO or Haul)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover ( ) ( Driffling		
	Control Parent LAURIE KILBRIDE		
Past Operator's License No	Contact Person.		
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 RECEIVED		
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 KANSAS CORPORATION COMMISSION		
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	11. 5 01.		
Title.	JUN 1 0 2013		
	Contact Person: BRENDA WALLER CONSERVATION DIVISION WICHITA, KS		
New Operator's License No	405-319-3259		
New Operator's Name & Address: XTO ENERGY INC.	Phone:		
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		
Tide:			
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			
Commission records only and ever vertically any			
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 pli		
Permit No.: Recommended action:	permitted by No.:		
Permit No.: Hecommended action:			
D. (.)	Date:		
Date:	Authorized Signature		
DISTRICT EPR	PRODUCTION 8.16.13 UIC 8-16-13		
Mail to: Past Operator New Oper	ator District		

#### Side Two

#### Must Be Filed For All Wells

Lease Name:	BROWN	* Location: 14 25 34WS E			
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)
1820 INF	15055213630000	1250FSL	1250FEL	GAS	ACTIVE
		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		
1.00		FSL/FNL			
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	de la constitución de la constit	
	4	FSL/FNL	FEUFWL		was a second and a second a second and a second a second and a second a second and a second and a second and
		FSL/FNL	FEL/FWL	A CONTRACTOR OF THE CONTRACTOR	
17		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F <b>W</b> L		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		RECEIVED NSA <del>3 CORPORATION COMMISS</del> IC
		FSL/FNL	FEL/FWL		JUN 1 8 2013
		FSL/FNL	FEL/FWL		— CONSERVATION DIVISION — WICHITA, KS

A separate sheet may be attached if necessary

\_\_FSL/FNL \_\_\_\_

\_ FEL/FWL

<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	AAA-SHIPEONOGO (V-V-) - 112 Marian Ma	Sec. 14 Twp.25 S. R. 34 Eas X West		
Address 1: P. O. BOX 4358				
Address 2:		Well #: 18-20 INF		
City: HOUSTON State: TX	_ Zip:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: ADAM SCOTT	the lease below: T0258 - R034W: S	SEC 014 All		
Phone: ( 713 4314859 Fax:	( 713 431-1475			
Email Address: adam.e.scott@exxonmol	oll.com			
Surface Owner Information:				
Name: See Attached	When filing a Form	T.1 involving multiple surface owners, attach an additional the information to the left for each surface owner. Surface		
Address 1:	owner information	owner information can be found in the records of the register of deeds for the		
Address 2:	county, and in the i	eal estate property tax records of the county treasurer.		
City: State:	Zip:+			
Select one of the following:  X   certify that, pursuant to the Ka	ansas Surface Owner Notice Act (House Bill 2032) In the subject well is or will be located; 1) a copy of on with this form; 2) if the form being filed is a Form	the Form C-1. Form CB-1, Form 1-1, or Form		
form; and 3) my operator name.	address, phone number, fax, and email address.			
KCC will be required to send thi	ion to the surface owner(s). I acknowledge that, be is information to the surface owner(s). To mitigate t sing charged a \$30.00 handling fee, payable to the i	the additional cost of the KCC performing this		
If choosing the second option, submit p form and the associated Form C-1, For	ayment of the \$30.00 handling fee with this form. In CB-1, Form T-1, or Form CP-1 will be returned.	f the fee is not received with this form, the KSONA-1		
I hereby certify that the statements mad	e herein are true and correct to the best of my know	vledge and belief.		
Date: 6/15/2013 Signature of C	Operator or Agent:	Title:Regional Land Manager		
API # :15055213630000	KDOR #220118	RECEIVED KANSAS CORPORATION COMMISSIO		

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

#### **Surface Owners**

City:

**BROWN** AP#: 15055213630000 Lease Name: Owner Name: KNOPP, MARVIN L TRUST Address: 1201 KINGSLEY ST City: SCOTT CITY State: KS Zip: 67871-1448 **Owner Name:** Address: Zip: City: State: Owner Name: Address: State: Zip: City: Owner Name: Address: State: Zip: City: **Owner Name:** Address:

State:

Zip:

RECEIVED KANSAS CORPORATION COMMISSION

Well #: 18--20 INF

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS