#### 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:		
X Gas Lease: No. of Gas Wells			
Gas Gathering System:	Lease Name: BROWN		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	Legal Description of Lease:		
feet from E / W Line	T025S - R034W: SEC 016 All		
Enhanced Recovery Project Permit No.:	10265 - RUSAW. SEC 010 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):		
Surface Pit Permit No.:(API No. If Drill Pit, WO or Haul)	feet from  N / S Line of Section feet from  E / W Line of Section  Haul-Off  Workover  Drilling		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling		
Past Operator's License No. 5208	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  Signature:Andrew D. Cole KANSAS CORPORATION COMMISSIO		
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT			
New Operator's License No. 32864	Contact Person: BRENDA WALLER JUN 1 8 2013		
New Operator's License No.	CONSERVATION DIVISION		
New Operator's Name & Address: XTO ENERGY INC.	Phone: WICHIA, No		
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		
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	n Commission. This acknowledgment of transfer pertains to Kansas Corporation		
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		
8/JK/15	PRODUCTION 8.15.13 UIC 8-15-13		
DISTRICT CENT	Pi-Ad-A		
Mail to: Past Operator New Oper			

#### Side Two

1

#### Must Be Filed For All Wells

I aasa kinma	BROWN	* Location: 16 25 34WSW			
Lease Nama 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
1	150550060600000 /	1320FSL 39	60FEL_	GAS	ACTIVE
	water and the same of the same	FSL/FNL	FEUFWL		
		FSL/FNL _	FEL/FWL		
		FSL/FNL _	FEL/FWL		
		FSL/FNL _	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSUFNL _	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL _	FEL/FWL		
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		FSL/FNL _	FEL/FWL		
		FSL/FNL _	FEL/FWL		
		FSL/FNL _	FEL/FWL		
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		FSUFNL _	FEL/FWL	·	
		FSL/FNL _	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL _		KANS	RECEIVED  AS CORPORATION COMMISSION
		FSL/FNL _	FEL/FWL		JUN 1 8 2013
		FSL/FNL _	FEL/FWL		CONSERVATION DIVISION
		FSL/FNL _	FEL/FWL		WICHITA, KS

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.

Select the corresponding form being filed: C-1 (Intent)	CB-1 (Cathodic Protection Borehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)
5208	Well Location:
OPERATOR: License # 5208  Name: EXXONMOBIL OIL CORPORATION	SW 46 - 25 - 24
Address 1: P. O. BOX 4358	applies of the state of the sta
Address 2:	DD01011
City: HOUSTON State: TX Zip: 77210 4+ 4	<del></del>
Contact Person: ADAM SCOTT	the lease below:
Phone: ( 713 431-14859 Fax: ( 713 431-1476	T025S - R034W: SEC 016 All
Email Address: adam.e.scott@exxonmobil.com	
Surface Owner Information:	
Name: See Attached	When filling a Form T-1 involving multiple surface owners, attach an additional
Address 1:	sheet listing all of the information to the left for each surface owner. Sundoe  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:+ _	
Select one of the following:	entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is one CP-1 that I am filing in connection with this form; 2) if form; and 3) my operator name, address, phone number 1.	or Notice Act (House Bill 2032), I have provided the following to the surface or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this other, fax, and email address.
KCC will be required to send this information to the	surface owner(s). To mitigate the additional cost of the KCC performing this to handling fee, payable to the KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.0 form and the associated Form C-1, Form CB-1, Form T-1, or	O handling fee with this form. If the fee is not received with this form, the KSONA-1 Form CP-1 will be returned.
I hereby certify that the statements made herein are true and	d correct to the best of my knowledge and belief.
Date: 6/15/2013 Signature of Operator or Agent:	M. Michael MiNulty Title: Regional Land Manager
API # :15055006060000 KDO	R #200375 RECEIVED KANSAS CORPORATION COMMISSION

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

JUN 1 8 2013

#### **Surface Owners**

API#: 15055006060000

Lease Name:

**BROWN** 

				_
Owner Name	: KOSTER, KATHY TRU	ST dated 12/15/06	3	
	: PO BOX 897			
	,			
City	: GARDEN CITY	State: KS	<b>Zip:</b> 67846-0897	
Owner Name				
Address	: -			
City	*	State:	Zip:	
Owner Name	•			
Address				
City	<b>/\$</b>	State:	Zip:	
O No	_			
Owner Name: Address				
City	<b>!</b>	State:	Zip:	
Owner Name:				
Address	•			
City:	:	State:	Zip:	
-			•	

RECEIVED KANSAS CORPORATION COMMISSION

Well #: 1

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS