#### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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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:				
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.: 207321			
Gas Gathering System:	Lease Name: C L DEW			
Saltwater Disposal Well - Permit No.:	NW Sec. 33 Twp. 26 R. 35W [ EXW			
Spot Location: feet from N / S Line	<del></del>			
feet from E / W Line	Legal Description of Lease: T026S - R035W: SEC 033 All			
Enhanced Recovery Project Permit No.:	10265 - R035W: SEC 035 All			
Entire Project: Yes No				
Number of Injection Wells **	County: Kearny			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE			
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.:  (API No. II Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling	feet from ☐ N / ☐ S Line of Section  leet from ☐ E / ☐ W Line of Section  Haul-Off ☐ Workover □ ☐ Drilling			
5000	Contact Parrow, LAURIE KILBRIDE			
Past Operator's License No. 5208	CONTACT PERSON: RECEIVED			
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 KANSAS CORPORATION COMMISSION			
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 JUN 1 8 2013			
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: <u>Audrew D. Cole</u> CONSERVATION DIVISION WICHITA, KS			
22964	Contact Person: BRENDA WALLER			
New Operator's License No. 32864	Contact Person:			
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259			
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: WGP-KHC LLC			
OKLAHOMA CITY, OK 73102	Date: 05/31/2013			
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze			
	authorization, surface pit permit #has been Commission. This acknowledgment of transfer pertains to Kansas Corporation above injection well(s) or 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.:			
D.	Date:			
Date:	Authorized Signature			
	PRODUCTION 8.19.13 UIC 8-19-13			
Mail to: Past Operator New Operat				

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

#### Side Two

Must Be Filed For All Wells

ease Name	C L DEW		* Location: 33	26 35W NW	
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
2	15093207240000 √	2970FSL	3300FEL	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		
		FSL/FNL	FEL/FWL		_
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL			
		FSL/FNL			
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		FSL/FNL			
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<del>«-</del>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	_	FSL/FNL	FEL/FWL		RECEIVED KANSAS CORPORATION COM
<del></del>		FSL/FNL	FEL/FWL		JUN 1 8 2013
		FSUFNL	FEL/FWL		CONSERVATION DIVISI

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 (inter-	ntj CB-1 (Cathodic Protection Boxehole Intent)	XT-1 (Transfer) CP-1 (Plugging Application)
5208	N. III. a. salama	
OPERATOR: License # 5208  Manya: EXXONMOBIL OIL CORPORATION	Well Location: N ₩ <sub>Soc</sub>	33 Twp.26 S. R. 35 Eas X West
Name: EXXONMOBIL OIL CORPORATION Address 1: P. O. BOX 4358		, , , , , , , , , , , , , , , , , , ,
Address 2:		Well #: 2
Cay: HOUSTON State: TX /ip: 77210 +	4250	iple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	the lease below:	рне меня от алеале, ениег ителеда делогряхи от
Phone: ( 713 431-1879 Fax: ( 713 431-1475	T026S - R035W: SEC 033	All
Email Address: adam.e.scott@exxonmobil.com		
Surface Owner Information:	And the state of t	, , , , , , , , , , , , , , , , , , ,
Name: See Attached	When filing a Form 1.1 iove	ving multiple surface owners, attach an additional
Address 1:		mation to the left for each surface owner. Surface ound in the records of the register of deeds for the
Address 2:		te property tax records of the county freasurer.
City: State: Zip:	+	
are preliminary non-binding estimates. The locations may Select one of the following:	be entered on the Form C-1 plat, Form C	B-1 plat, or a separate plat may be submitted.
I certify that, pursuant to the Kansas Surface Ov owner(s) of the land upon which the subject well CP-1 that I am filing in connection with this form; form; and 3) my operator name, address, phone n	is or will be located: 1) a copy of the For 2) if the form being filed is a Form C-1 or	m C-1, Form CB-1, Form T-1, or Form
I have not provided this information to the surface KCC will be required to send this information to the task, I acknowledge that I am being charged a \$30	he surface owner(s). To mitigate the add	itional cost of the KCC performing this
If choosing the second option, submit payment of the \$30 form and the associated Form C-1, Form CB-1, Form T-1,		e 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 knowledge a	and belief.
Date. 6/15/2013 Signature of Operator or Agent: _	M. Michael McNulty	Title: Regional Land Manager
API # :15093207240000 KI	DOR #207321	RECEIVED KANSAS CORPORATION COMMISSION

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

### **Surface Owners**

API#:1	5093207240000	Lease Name:	C L DEW		 Well #: 2
					A
Owner	Name: SMITH, BRYAN	κ			
Ad	ddress: 10450 N RD S				
	City: ULYSSES	State:	KS :	<b>Zip:</b> 67880	
	r Name:				
A	ddress:				
	City:	State:		Zip:	
	r Name: ddress:				
	City:	State:		Zip:	
Owner Ac	Name: idress:				
	City:	State:		Zip:	
Owner Ac	Name: idress:				
	City:	State:		Zip:	

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS