KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 7-1 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: MUST be subm.	itted 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.: 200975		
Gas Gathering System:	Lease Name: DREIBELBIS		
Saltwater Disposal Well - Permit No.:	11, 1		
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T034S - R039W: SEC 009 N2, SEC 018 N2		
Entire Project: Yes No			
Number of Injection Wells **	County: Morton		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE		
** Side Two Must Be Completed.			
Old in med of Complete.	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. If Drill Pit, WO or Haul)	feet from		
Type of Pit: Emergency Bum Settling	Haul-Off Workover () 1/2 Drilling		
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		
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	KANSAS CORPORATION COMMISSION Signature: Andrew D. Cole		
	JUN 1 8 2013		
New Operator's License No. 32864	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	Oll / Gas Purchaser: ONEOK FIELD SERVICES		
OKLAHOMA CITY, OK 73102	Date: 05/31/2013		
Title: _ SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze		
Ting,	orginature		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been		
	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 uses not comely any ownership interest in the	above allocators wealthy or preparation.		
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:		
0/14/12	PRODUCTION 8.15.13 UIC 8-15-13		
	or District		

Side The

Must Be Filed For All Wells

Lease Name	: DREIBELBIS	Simon and the second se	* Location: 9	34 39W NW	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fo	Section Line rom South Line)	Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
2	15129003470000 /	3960FSL	3960FEL_	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		_
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		FSL/FNL	FEL/FWL		
	-	FSL/FNL	FEL/FWL		-
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		
	· •	FSL/FNL	FEL/FWL		
	Market manners con Allestable Schools or more amountment or a son manufact acceptable	FSL/FNL	Determination of FEL/FWL	ANY OF THE ANALYSIS AND ANY	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL	KAI	NSAS CORPORATION COMMISSIO
		FSL/FNL	FEL/FWL		JUN 1 8 2013

A separate sheet may be attached if necessary

___FSL/FNL ______FEL/FWL _

CONSERVATION DIVISION
WICHITA, KS

[&]quot;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 hisy 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.

£209				
OPERATOR: License # 5208 Name: EXXONMOBIL OIL CORPORATION	Well Location:	Nulau 9 Tu 24 a a 29 Tu Vilau		
		NW Sec. 9 Twp.34 S. R. 39 Eas X West		
	•			
Address 2:	4020	REIBELBIS Well #: 2		
City: HOUSTON State: TX Zip:		If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: T034S - R039W: SEC 009 N2, SEC 018 N2		
Contact Person: ADAM SCOTT				
Phone: (713 /31-1) Fax: (71				
Email Address: adam.e.scott@exxonmobil.com	1			
Surface Owner Information:				
Name: See Attached	When filing a For	rn 1.1 involving multiple surface owners, attach an additional		
Address 1:	sheet listing all o	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 county, and in the real estate property tax records of the county treasurer.		
Address 2:				
City: State: Zip:	+			
Select one of the following:	atons may be 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 si CP-1 that I am filing in connection with form; and 3) my operator name, addres I have not provided this information to t KCC will be required to send this information.	ubject well is or will be located: 1) a copy of this form; 2) if the form being filed is a Forn ss, phone number, fax, and email address. the surface owner(s). I acknowledge that, be	2), I have provided the following to the surface f the Form C-1. Form CB-1, Form T-1, or Form n C-1 or Form CB-1, the plat(s) required by this ecause I have not provided this information, the the additional cost of the KCC performing this KCC, which is enclosed with this form.		
If choosing the second option, submit paymen form and the associated Form C-1, Form CB-1		If the fee is not received with this form, the KSONA-1		
I hereby certify that the statements made herei	n are true and correct to the best of my kno	wledge and belief.		
Date: 6/15/2013 Signature of Operator	r or Agent: M. Michael McNulty	Title: Regional Land Manager		
API # :15129003470000	KDOR #200975	RECEIVED KANSAS CORPORATION COMMISSIO		

JUN 1 8 2013

Surface Owners

API#:	15129003470000	Lease Name: _	DREIBELBIS	Well #: 2			
Owner Name: ELKHART FOREST SERVICE							
	Address: P O BOX 300						
	City: ELKHART	State:	KS Zip: 67950-0300				
	er Name:						
	Address:						
	City:	State:	Zip:				
	er Name: Address:						
	City:	State:	Zip:				
_							
	er Name: Address:						
	City:	State:	Zip:				
	er Name: Address:						
	City:	State:	Zip:				

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS