### 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:	WHO WILL THE WHILL				
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.: 221861				
Gas Gathering System:	Lease Name: GOOCH				
Saltwater Disposal Well - Permit No.:	SW sec. 3 Twp. 35 R. 36W EXW				
Spot Location: feet from N / S Line	Legal Description of Lease:				
feet from E / W Line	T035S - R036W: SEC 003 SE4, NE4, NW4, SW4				
Enhanced Recovery Project Permit No.:					
Entire Project: Yes No					
Number of Injection Wells**	County: Stevens				
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE				
** 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				
Type of Pit: Emergency Burn Settling	Haul-Off Workover ( ) [2 ] Drilling				
	LAURIE KILBRIDE				
Past Operator's License No	Contact Person:				
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: _713-431-1182				
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date:				
Title: _RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: <u>Andrew D. Cole</u>				
New Operator's License No	Contact Person: BRENDA WALLER RECEIVED KANSAS CORPORATION COMMISSIO				
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259				
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: JUN 1 8 2013				
OKLAHOMA CITY, OK 73102	Date: 05/31/2013 CONSERVATION DIVISION				
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 records only and does not convey any ownership interest in the	on 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:	l .				
Data	-   Date:				
Date:	Authorized Signature				
DISTRICT EPR 7/31/13	PRODUCTION 8-1-13 UIC 8-1-13				
Mail to: Past Operator New Ope					

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

#### Side Two

#### Must Be Filed For All Wells

Well No.	API No. (YR DRLD/PRE '67) 5189221600001 -/	Footage from (i.e. FSL = Feet fr  150FSL  FSL/FNL  FSL/FNL  FSL/FNL	2145FWL FEL/FWL	Type of Well (OlVGas/INJ/WSW) GAS	Well Status (PROD/TA'D/Abandoned)  ACTIVE
23 INF 1	5189221600001	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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	-		
		FSL/FNL	FEL/FWL		
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		FSUFFNL		KANS	RECEIVED AS CORPORATION COMMISSION
					JUN 1 8 2013
***************************************		FSL/FNL			CONSERVATION DIVISION WICHITA, KS

A separate sheet may be attached if necessary

<sup>&</sup>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 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	NC	W Sec. 3 Twp.35 S. R. 36 EastX West				
Address 1: P. O. BOX 4358	-					
Address 2:	Lease Name: GOC	OCH Well #: 2-3 INF				
Ry: HOUSTON State: TX		If filing a Form T-1 for multiple wells on a lease, enter the legal description of				
Contact Person: ADAM SCOTT		the lease below: T035S - R036W: SEC 003 SE4, NE4, NW4, SW4				
Phone: (	( 713 431-1476	,,,				
Email Address: <u>adam.e.scott@exxonmol</u>	bil.com					
Surface Owner Information:						
Name: See Attached	When filing a Form	1.1 involving multiple surface owners, attach an additional				
Address 1:	owner information of	the information to the left for each surface owner. Surface can be found in the records of the register of deeds for the				
Address 2:	county, and in the n	eal estate property tax records of the county treasurer.				
City: State:	Zip:+					
Select one of the following:						
owner(s) of the land upon which CP-1 that I am filing in connection	insas Surface Owner Notice Act (House Bill 2032), In the subject well is or will be located: 1) a copy of the In with this form; 2) if the form being filed is a Form address, phone number, fax, and email address.	the Form C-1, Form CB-1, Form T-1, or Form				
KCC will be required to send thi	ion to the surface owner(s). I acknowledge that, bed is information to the surface owner(s). To mitigate t ing charged a \$30.00 handling fee, payable to the k	the additional cost of the KCC performing this				
task, I acknowledge that I am be	and arrest dam a description transmission to the health and a state of					
task, I acknowledge that I am be		f the fee is not received with this form, the KSONA-1				
task, I acknowledge that I am be If choosing the second option, submit pa form and the associated Form C-1, Forn	avment of the \$30,00 handling fee with this form. If	f the fee is not received with this form, the KSONA-1				
task, I acknowledge that I am be  If choosing the second option, submit per form and the associated Form C-1, Form  I hereby certify that the statements made	ayment of the \$30.00 handling fee with this form. If n CB-1, Form T-1, or Form CP-1 will be returned.	f the fee is not received with this form, the KSONA-1				

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners						
AP#: 15189221600001	Lease Name: _	G000	Н		 Well #:3 INF	
Owner Name: MILLS, M DOUG	GLAS & RITA ATRS	TTEES				
Address: 979 ROAD 22						
City: HUGOTON	State:	KS	Zip:	67951-5105		
Owner Name: MILLS, MATTHE Address: 1902 ROAD C	EW D & KYLA R					
City: HUGOTON	State:	KS	Zip	67951-5177		
Owner Name: Address:						
City:	State	:	Zip:			

**Owner Name:** Address:

City:

State:

Zip:

Owner Name:

Address:

City:

State:

Zip:

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS