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:	ino with this lotti.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 7/1/2013			
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 201456			
Gas Gathering System:	Lease Name: GROSECLOSE			
Saftwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T026S - R036W: SEC 030 All			
Entire Project: Yes No				
Number of Injection Wells **	County: Kearny			
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) Type of Pit: Emergency Burn Settling	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover 6 & 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	RECEIVED			
	U9(G.			
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole JUN 1 8 2013			
New Operator's License No	CONSERVATION DIVISION Contact Person: BRENDA WALLER WICHITA, KS			
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259			
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 a noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the a	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.:			
Data	Date:			
Date:	Authorized Signature			
DISTRICT EPR 8//2//3 P	PRODUCTION 8.14.13 UIC 8-13-(3			
Mail to: Past Operator New Operato				

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

Side Two

Must Be Filed For All Wells

Lease Name	GROSECLOSE		・Location: 30 26 36WNW					
Well No.	API No. (YR DRLD/PRE '67)	Footage from	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)			
1	15093005310000 🗸	2790 2040FSL	2790 2640FEL	GAS	ACTIVE			
					_			
		FSL/FN	LFEL/FWL	No. of the Control of				
		FSL/FN	LFEL/FWL					
		FSL/FN	LFEL/FWL	V				
		FSL/FN	L FEL/FWL					
· · · · · · · · · · · · · · · · · · ·		FSL/FN	LFEL/FWL					
		FSL/FN	FEL/FWL		_			
		FSL/FNI	LFEL/FWL		<u>.</u>			
<u>.</u>		FSUFN	LFEUFWL					
		FSL/FN	LFEL/FWL					
		FSL/FN	LFEL/FWL					
		FSL/FN	LFEL/FWL					
		FSL/FN	LFEL/FWL					
		FSL/FN	LFEL/FWL					
			LFEL/FWL					
		FSL/FN						
			LFEL/FWL					
		FSL/FN						
National Control of the Control of t		FSL/FN		We have been assumed to the contract of the co				
					05051(50			
		FSUFN		KAN	RECEIVED ISAS CORPORATION COMMISSION			
		FSL/FN			JUN 1 8 2013			
		FSL/FN			CONSERVATION DIVISION WICHITA, KS			

A separate sheet may be attached if necessary

^{*} 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 t	illed: [_]C-1 (intent) [_]CB-1 (Calhodic Protect	tion Borehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)				
OPERATOR: License # 5208	Well Loc					
Name: EXXONMOBIL OIL CORPORATI		NW Sec. 30 Twp.26 S. R. 36 Eas X West				
Address 1: P. O. BOX 4358		Kearny				
Address 2:	Lease N	ame: GROSECLOSE Well #: 1				
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: T0268 - R036W: SEC 030 All				
Contact Person: ADAM SCOTT						
Phone: (713 431- 459 Fax	: (KU36W: SEC U3U AII				
Email Address: adam.e.scott@exxonmo	obli.com					
Surface Owner Information:						
Name: See Attached	When file	ng a Form T-1 involving multiple surface owners, attach an additional				
Address 1:	sheet lis	ting all of the information to the left for each surface owner. Surface formation can be found in the records of the register of deeds for the				
Address 2:	country of	nd in the real estate property tax records of the county treasurer.				
City: State:	Zip:+					
Select one of the following:		C-1 plat, Form CB-1 plat, or a separate plat may be submitted.				
owner(s) of the land upon which CP-1 that I am filing in connection	h the subject well is or will be located: 1) a	Bill 2032), I have provided the following to the surface copy of the Form C-1, Form CB-1, Form T-1, or Form a Form CB-1, the plat(s) required by this dress.				
KCC will be required to send th	is information to the surface owner(s). To	that, because I have not provided this information, the mitigate the additional cost of the KCC performing this e to the KCC, which is enclosed with this form.				
If choosing the second option, submit p form and the associated Form C-1, For	payment of the \$30.00 handling fee with this m CB-1, Form T-1, or Form CP-1 will be ret	s form. If the fee is not received with this form, the KSONA-1 urned.				
I hereby certify that the statements mad	le herein are true and correct to the best of	my knowledge and belief.				
Date: 6/15/2013 Signature of 6	Operator or Agent:	Title: Regional Land Manager				
API # :15093005310000	KDOR #201456	RECEIVED KANSAS CORPORATION COMMISSION				

JUN 1 8 2013

Surface Owners

API#: 1509300	5310000	Lease Name:	GROSE	CLOS	E	 Well #:	
	-	_					
Owner Name:	SPENCER, EUGE	NE & LINDA					
	1151 ROAD 30						
City:	ULYSSES	State:	KS	Zip:	67880		
Owner Name	•						
Address		•					
		•		_,			
City		State:		Zip:			
Owner Name	:						
Address							
City	_	States		Zip:			
City	i	State:		zip:			
Owner Name: Address:							
7,441.000.	•						
City:	:	State:		Zip:			
Owner Name							
Address							
City:	1	State:		Zip:			

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JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS