#### 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,
MUST be submitted with this form.

ed with this form.
Effective Date of Transfer: 7/1/2013  KS Dept of Revenue Lease No.: 220466  Lease Name: C HOFFMAN B  N U Sec. 30 Twp. 26 R. 35W  E X W  Legal Description of Lease:  T026S - R035W: SEC 030 All  County: Kearny  Production Zone(s): CHASE
Injection Zone(s):
teet from N / S Line of Section  leet from E / W Line of Section  Haul-Off Workover OR Drilling
Contact Person: LAURIE KILBRIDE
Phone:
Date:05/31/2013
Signature:Andrew D. Cole
Signature:
Contact Person: BRENDA WALLER  Phone: 405-319-3259 RECEIVED  KANSAS CORPORATION COMMISSION  Oil / Gas Purchaser: WGP-KHC LLC  Date: 05/31/2013 CONSERVATION DIVISION  Signature: Douglas C. Schultze WICHITA, KS
n authorization, surface pit permit #has been n Commission. This acknowledgment of transfer pertains to Kansas Corporation e above injection well(s) or pit permit.
the new operator of the above named lease containing the surface pit
Date:
PRODUCTION

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

#### Side Two

#### Must Be Filed For All Wells

Lease Name:	CHOFFMAN B		* Location: 30 26 35W Nພ				
Well No.	API No. (YR DRLD/PRE '67)	Foolage from (i.e. FSL = Feet fo	Section Line rom South Line)	Type of Well (Oil/Gas/INJ/WSW)	Weil Status (PROD/TA'D/Abandoned)		
В3	15093214570000 🗸	1250FNL	1250FWL	GAS	ACTIVE		
		FSL/FNL	FEVFWL				
		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				
		FSUFNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL	<u> </u>			
		FSL/FNL	FEL/FWL				
ر يوند در	and the state of t	FSL/FNL	FELFWL	SERVICE TO A CONTRACT OF THE PROPERTY OF THE P	Bayeria de la Persona de la composição de la Persona de la		
		FSL/FNL	FEL/FWL		_		
<ul> <li>अध्यक्षित हैन्स्य क्षेत्रकार कर अध्यक्ष कर अप - अप - अप</li> </ul>		FSL/FNL	FEL/FWL	apude coulong system — on make parameters of the contribution of the con-	Albanda Britishangay or assessor is an independent and a sequipment of the sequipmen		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		- TOTALED		
		FSL/FNL	FEL/FWL	KA	RECEIVED NSAS CORPORATION COMMISSION		
		FSL/FNL	FEL/FWL		JUN 1 8 2013		
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION 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 date	nti CB-1 (Carbodic Protection Boxehole Into	ent) XT-1 (Transfer) CP-1 (Plugging Application)				
OPERATOR: License #5208		sec. 30 Twp.26 S. R. 35 Eas X West				
Name: EXXONMOBIL OIL CORPORATION						
Address 1: P. O. BOX 4358						
Address 2:		MAN B Well #: B3				
City: HOUSTON State: TX 7ip: 77210 -	4 4358 If filing a Form T-1 for r	nultiple wells on a lease, enter the legal description of				
Contact Person: ADAM SCOTT	TAGES DASEW- SEC	the lease below: T026S - R035W: SEC 030 All				
Phone: { 713 431-7654 Fax: ( 713 431-147	5					
Email Address: adam.e.scott@exxonmobil.com						
Surface Owner Information:						
Name: See Attached	When filing a Form 1.1	When filing a Form 1.1 lovolving multiple surface owners, attach an additional				
Address 1:	sheet listing all of the i	information to the left for each surface owner. Surface be found in the records of the register of deeds for the				
Address 2:	any one and in the real.	estate property tax records of the county freasurer.				
City: State: Zip:						
If this form is being submitted with a Form C-1 (Intent) of the KCC with a plat showing the predicted locations of lea are preliminary non-binding estimates. The locations ma Select one of the following:	ase maris, tank halteries, bibelines, and	a electrical lines. The locations shown on the plat				
I certify that, pursuant to the Kansas Surface Cowner(s) of the land upon which the subject we CP-1 that I am filing in connection with this form; form; and 3) my operator name, address, phone	If is or will be located: 1) a copy of the ; 2) if the form being filed is a Form C-1	Form C-1, Form CB-1, Form 1-1, or Form				
I have not provided this information to the surfac KCC will be required to send this information to task, I acknowledge that I am being charged a \$	the surface owner(s). To mitigate the	additional cost of the KCC performing this				
If choosing the second option, submit payment of the \$. form and the associated Form C-1, Form CB-1, Form T-	30.00 handling fee with this form. If the 1. or Form CP-1 will be returned.	e fee 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 knowled	lge and belief.				
Date: 6/15/2013 Signature of Operator or Agent:	M. Michael McNulty	Title:Regional Land Manager				
API#:15093214570000	KDOR #220466	RECEIVED KANSAS CORPORATION COMMISS				

JUN 1 8 2013

#### **Surface Owners**

API#: 15093214570000

Lease Name:

Owner Name: GUGELMEYER, DAVID JON & CARYN JEAN									
Address: 24	I1 ROAD T								
City: LA	AKIN	State: KS	Zip:	67860					
Owner Name:									
Address:									
City:		State:	Zip:	:					
Owner Name:									
Address:									
City:		State:	Zip:						
•			•						
Owner Name:									
Address:									
City:		State:	Zip:						
Owner Name:									
Address:									
City:		State:	Zip:						

C HOFFMAN B Well #: B3

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS