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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-t 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 Kanase Surface Owner Notification Act,

Check Applicable Boxes: MUST be sub	mitted 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.: 207369
Gas Gathering System:	Lease Name: C A LOUCKS
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from DE / DW Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T026S - R036W: SEC 025 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. If Drill Pit, WO or Haul)	feet from N / S Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workwar A & Drilling
	The state of District
Past Operator's License No. 5208 V	Contact Person: LAURIE KILBRIDE RECEIVED KANSAS CORPORATION COMMISSION
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: _713-431-1182
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 JUN 1 8 2013
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole CONSERVATION DIVISION WICHITA, KS
New Operator's License No. 32864	Contact Person: BRENDA WALLER
New Operator's Name & Address: XTO ENERGY INC.	Phone:405-319-3259
210 PARK AVENUE, SUITE 2350	
OKLAHOMA CITY, OK 73102	Oil / Gas Purchaser: WGP-KHC LLC Date: 05/31/2013
Title: SR. OPERATIONS VICE PRESIDENT	-
Ting:	Signature: <u>Douglas C. Schultze</u>
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been
noted, approved and duly recorded in the records of the Kansas Corporation	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	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.:
Date:	Date:
Authorized Signature	Authorized Signature
	PRODUCTION 8.16.13 UIC 8-16-13
Mail to: Past Operator New Operator	or District

V

Must Be Filed For All Wells

V000	 	207369

* Lease Name:. Well No.	API No. (YR DRLD/PRE '67)	* Location: 25 26 36W NW					
		Foolage from (i.e. FSL = Feet)	n Section Line from South Line)	Type of Well (Ol/Gas/NJ/WSW)	Well Status (PROD/TA'D/Abandoned) ACTIVE		
		2944 FSL 2370FNL	2884 FEL 2370FWL	GAS			
		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				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		-		
		FSL/FNL	FEL/FWL	Management of the second of th			
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL	4-02/2004			
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		RECEIVED		
		FSL/FNL	FEL/FWL	KA	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

^{*} 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.

Name: EXXONMOBIL OIL CORPORATION	Well Location:			
Address 1:P. O. BOX 4358	County: Kearny			
Address 2:	Lease Name: CALOUCKS Well # 2			
City: HOUSTON State: TX Zip: 77210 + 4358	If filing a Form 7-1 for multiple wells on a lease, enter the legal description of			
Contact Person: ADAM SCOTT	the lease below: T026S - R036W: SEC 025 All			
Phone: (713 431-10001 Fax: (713 431-1475				
Email Address: adam.e.scott@exxonmobil.com				
Surface Owner Information:				
Name: See Attached	When filing a Form T.1 involving multiple surface owners, attach an additional			
Address 1:	Sheet USUNG all of the Information to the left for each surface number. Surface			
Address 2:	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.			
City:				
are preliminary non-binding estimates. The locations may be entered o Select one of the following:	Ric Protection Borenoie Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be a CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	being filed is a Form C.1 or Form CP.1, the platfol and the state of t			
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	being filed is a Form C-1 or Form CB-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. Cknowledge that, because I have not provided this information, the plat(s). To mitigate the additional cost of the KCS medicine.			
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling f choosing the second option, submit payment of the \$30.00 handling	coated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. cknowledge that, because I have not provided this information, the wher(s). To mitigate the additional cost of the KCC performing this life, payable to the KCC, which is enclosed with this form.			
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. Incknowledge that, because I have not provided this information, the wher(s). To mitigate the additional cost of the KCC performing this life, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.			

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#: 15093205890000

API#: 1509320	05890000	Lease Name: _	CAL	OUCKS			Well #: _2	
						?		
		DAVID JON & CAR	RYN JE	AN				
Address:	241 ROAD T							
City:	LAKIN	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:				

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS