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 KBONA-1, Certification of Compliance with the Kaneae Surface Owner Notification Act, MUST be submitted with this form.

Check Applicable Boxes:	nation 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.: 221075
Gas Gathering System:	Lease Name: PARKER ESTATE
Saltwater 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.:	T0348 - R036W: SEC 034 W2, E2
Entire Project: Yes No	
Number of Injection Wells	County: Stevens
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
** Start Building Completed	Injection Zone(s):
Surface Pit Permit No.: (API No. II Drill Pit, WO or Heul)	feet from N / S Line of Section
	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Past Operator's License No. 5205	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	Signature:
New Operator's License No. 32864	Contact Person: BRENDA WALLER CONSERVATION DIVISION
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259
210 PARK AVENUE, SUITE 2350	
OKLAHOMA CITY, OK 73102	Oil / Gas Purchaser: ONEOK FIELD SERVICES Date: 05/31/2013
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface oit permit #
	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	
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:	•
. Proposition and action:	permitted by No.:
Date:	Date
Authorized Signature /	Date:
DISTRICT EPR	PRODUCTION 8-1-13
	orDistrict

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

Side Two

Must Be Filed For All Wells

W

KDOR Lease No.:	221076					
* Lease Name:	PARKER ESTATE	* Location: 3	4 34 36WSW			
Well No.	API No.	England from Section Line	Time of Milet	141-11 60		

Lease Name	FARRER ESTATE	* Location: 34 34 36WSW				
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fi	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abendoned)	
5-2 INF 15189220080001	1250FSL	1260FWL	GAS	ACTIVE		
		FSL/FNL	FEL/FWL			
		FSUFNL	FEL/FWL			
	-	FSL/FNL	FEL/FWL		***************************************	
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEUFWL			
		FSL/FNL	FEL/FWL		RECEIVED KANSAS CORPORATION COMMISSION	
		FSL/FNL	FEL/FWL		<u>JUN 1 8 2013</u>	
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION WICHITA, KS	

A separate sheet may be attached if necessary

[&]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	SW Sec. 34 Twp.34 S. R. 36 EastX West
Address 1: P. O. BOX 4358	County: Stevens
Address 2:	Lease Name: PARKER ESTATE Well #: 5-2 INF
City: HOUSTON State: TX Zip: 77210 + 4358 Contact Person: ADAM SCOTT	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Phone: (713 431- 1659 Fax: (713 431-1476	T034S - R036W: SEC 034 W2, E2
Email Address: adam.e.acott@exxonmobil.com	
Surface Owner Information:	
Name: See Attached	When filing a Form T.1 involving multiple surface owners, attach an additional
Address 1:	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
Address 2:	county, and in the real estate property tax records of the county treasurer.
City: State: Zip:+	
Select one of the following:	n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
X 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 k CP-1 that I am filing in connection with this form; 2) if the form t form; and 3) my operator name, address, phone number, fax, at	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form Deing filed is a Form C-1 or Form CB-1, the plat(s) required by this
I have not provided this information to the surface owner(s). I as KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling	cknowledge that, because I have not provided this information, the mer(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 1 will be returned.
hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.
Date: 6/15/2013 Signature of Operator or Agent: M. Michael	t Willulty Regional Land Manager
API # :15189220080001 KDOR #221075	RECEIVED KANSAS CORPORATION COMMISSION

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

AP#: 15189220080001

Owner Name	CRACE ALLEN DADVED	0 1 155251				
	GRAGE, ALLEN PARKER 3408 AMHERST AVE	& LIEBKEM	ANN, SAN			
Addiess.	3400 AMITERS I AVE					
City:	DALLAS	State: T.	X Zip:	75225-7624		
Owner Name:						
Address:						
City:		State:	Zip:			
Owner Name:						
Address:						
City:		State:				
Ony.		State:	Zip:			
Owner Name:						
Address:						
0 14		-				
City:		State:	Zip:			
Owner Name:						
Address:						
City:		State:	Zip:			
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Lease Name: PARKER ESTATE

RECEIVED KANSAS CORPORATION COMMISSION

Well #: 5-2 INF

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS