070113_Parker_SW-pdf

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: MUST be submitted	hed with this form.
Check Applicable Boxes: Coll Lease: No. of Oil Wells	Effective Date of Transfer: 7/1/2013 KS Dept of Revenue Lease No.: 221079 Lease Name: PARKER
Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells ** Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE ** Side Two Must Se Completed.	(NWNW) County: Stevens Production Zone(s): CHASE Injection Zone(s):
Surface Pit Permit No.:(API No. If Drill Pit, WO or Heal) Type of Pit: Emergency Burn Settling	leet from N / S Line of Section S Line of Section E / W Line of Section Haul-Off Workover D Drilling
Past Operator's License No. 5205 Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION P. O. BOX 4358, HOUSTON, TX 77210-4358 Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Contact Person: LAURIE KILBRIDE Phone: 713-431-1182 KANSAS CORPORATION COMMISSION Date: 05/31/2013 JUN 1 8 2013 Signature: Andrew D. Cole CONSERVATION DIVISION WICHITA, KS
New Operator's License No. 32864 V New Operator's Name & Address: XTO ENERGY INC. 210 PARK AVENUE, SUITE 2350 OKLAHOMA CITY, OK 73102 Title: SR. OPERATIONS VICE PRESIDENT	Contact Person: BRENDA WALLER Phone: 405-319-3259 Oil / Gas Purchaser: ONEOK FIELD SERVICES Date: 05/31/2013 Signature: Devolas C. Schultze
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation
	the new operator of the above named lease containing the surface pit permitted by No.:
	PRODUCTION 8.1.13 UIC 8-1-13 OF District

Side Two

Must Be Filed For All Wells

Lease Name	: PARKER	Location: 5 32 36W SW			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (OIVGas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
1-3 INF	15189220590000 🗸	720FSL	616FEL	GAS	ACTIVE
	_	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		
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		F9L/FNL		***************************************	
		FSL/FNL			
		FSL/FNL			
		FSL/FNL			RECEIVED_ SAS CORPORATION COMMISSION
		FSL/FNL			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

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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 CORPORATI	0.1	Sec. 5 Twp.32 S. R. 36 Eas X West			
Address 1: P. O. BOX 4358	Courty: Stevens				
Address 2:	Lease Name: PARKI	ER Well #: 1-3 INF			
City: HOUSTON State: TX	Zip: 77210 + 4358 If filing a Form 7-1 for	rmultiple wells on a lease, enter the legal description of			
Contact Person: ADAM SCOTT	the lease below:	the lease below: T0328 - R036W: SEC 005 S2 N2, S2 (NENE) (NWNE) (NENW)			
Phone: (713 431-1859 Fax	(713 431-1476 (NWNW)				
Email Address: adam.e.ecott@exxonmo	oil.com				
Surface Owner Information:					
Name: See Attached	When filing a Form T.	When filing a Form T.1 involving multiple surface owners, attach an additional 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 1:					
Address 2:		of estate property tax records of the county treasurer.			
City: State:	_ Zip:++				
Select one of the following:	he locations may be entered on the Form C-1 plat, Fo				
owner(s) of the land upon which CP-1 that I am filing in connection	nsas Surface Owner Notice Act (House Bill 2032), I the subject well is or will be located: 1) a copy of the n with this form; 2) if the form being filed is a Form C- address, phone number, fax, and email address.	e Form C-1, Form CB-1, Form T-1, or Form			
KCC will be required to send th	on to the surface owner(s). I acknowledge that, because information to the surface owner(s). To mitigate the ing charged a \$30.00 handling fee, payable to the KC	additional cost of the KCC performing this			
If choosing the second option, submit p form and the associated Form C-1, For	nyment of the \$30.00 handling fee with this form. If the CB-1, Form T-1, or Form CP-1 will be returned.	he fee is not received with this form, the KSONA-1			
I hereby certify that the statements mad	herein are true and correct to the best of my knowle	dge and belief.			
Date: 6/15/2013 Signature of 6	perator or Agent: M. Michael McNulty	Title: Regional Land Manager			
API # :15189220590000	KDOR #221079	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

PARKER AP#: 15189220590000 Lease Name: Well #: 1-3 INF Owner Name: COX, JEFFREY J Address: 1231 ROAD 14 **City: HUGOTON** State: KS Zip: 67951-5109 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