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 Compilance with the Kansas Surface Owner Notification Act,

Check Applicable Boxes: MUST be submit	thed 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.: 208490
Gas Gathering System:	Lease Name: TATE
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
teet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T026S - R037W: SEC 023 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) Type of Pit: Emergency Burn Settling	iest from N / S Line of Sectioniest from E / W Line of Section Haul-Off Workover O D Drilling
Type of Pit: Emergency Burn Settling	
Past Operator's License No. 5208	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	Oil / Gas Purchaser: ONEOK FIELD SERVICES
	0519419049
OKLAHOMA CITY, OK 73102	Vale.
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u>
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duty 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
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:
Date:	Authorized Signature
· · · · · · · · · · · · · · · · · · ·	PRODUCTION 8.14.13 UIC 8-13-13
Mail to: Past Operator New Opera	

Side Two

Must Be Filed For All Wells

Lease Name	; TATE		* Location: 23 26 37WSW					
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned			
12		1320FSL	3960FEL	GAS	ACTIVE			
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
			FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
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		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					

	-	FSL/FNL	FEL/FWL					
Special variation of services		FSL/FNL	FEL/FWL		December 100 and 100 a			
		FSL/FNL	FEUFWL					
		FSL/FNL	FEL/FWL	APIAN	RECEIVED S CORPORATION COMMISSION			
		FSL/FNL	FEL/FWL	Mison	JUN 1 8 2013			
		FSL/FNL	FEL/FWL		7014 1 0 5010			

A separate sheet may be attached if necessary

FEUFWL

_FSL/FNL __

CONSERVATION DIVISION WICHITA, KS

^{*} 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 Permil); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

OPERATOR: License # 5208	Well Location:	SW Sec. 23 Twp.26 S. R. 37 Eas X West
Name: EXXONMOBIL OIL CORPORATIO Address 1: P. O. BOX 4358	word controlled to the control of th	ny Sec. 25 IWD-25 R. 25 East Alivest
		TATE Well #: 12
Address 2:		17-1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	the lease belo	•
Phone: (713 431-1859 Fax: (713 431-1475 T026S - R037	W: SEC 023 All
Email Address: adam.e.scott@exxonmob	II.com	
Surface Owner Information:		
Name: See Attached	When filing a	Form T-1 involving multiple surface owners, attach an additional
Address 1:	sheet listing a owner informa	If of the information to the left for each surface owner. Surface tion 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:+	
are preliminary non-binding estimates. The Select one of the following:	ne locations may be entered on the Form C-1 p	nes, and electrical lines. The locations shown on the plat lat, 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	the subject well is or will be located: 1) a copy	032), I have provided the following to the surface y of the Form C-1, Form CB-1, Form T-1, or Form orm C-1 or Form CB-1, the plat(s) required by this s.
KCC will be required to send this	on to the surface owner(s). I acknowledge that information to the surface owner(s). To mitig ng charged a \$30.00 handling fee, payable to t	, because I have not provided this information, the ate the additional cost of the KCC performing this the KCC, which is enclosed with this form.
If choosing the second option, submit pa form and the associated Form C-1, Form	yment of the \$30.00 handling fee with this for CB-1, Form T-1, or Form CP-1 will be returned	m. If the fee is not received with this form, the KSONA-1 d.
I hereby certify that the statements made	herein are true and correct to the best of my k	snowledge and belief.
Date: 6/15/2013 Signature of O	perator or Agent:	Title: Regional Land Manager
		RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

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

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#: 150932008	390000 Lease N	ame: TATE			Well #: _1	-2
					.	
Owner Name: T/	ATE, GEORGE H & JUDY	'B				
Address: Po		_				
7,441,0001						
City: LA	AKIN	State: KS	Zip: 67860	•		
Owner Name:						
Address:						
City:		State:	Zip:			
Owner Name:						
Address:						
O!4		04-4	7!			
City:		State:	Zip:			
Owner Name: Address:						
City:		State:	Zip:			
Owner Name:						
Address:						
014 -		State	7:			
City:		State:	Zip:			

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS