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:	teo wan 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.: 207417			
Gas Gathering System:	Lease Name: USA WHITE B			
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.:	T026S - R035W: SEC 003 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.:				
Past Operator's License No5208 V	Contact Person: LAURIE KILBRIDE RECEIVED			
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Contact Person: KANSAS CORPORATION COMMISSION Phone: 713-431-1182			
	ILIN 1 8 2013			
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 CONSERVATION DIVISION			
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole WICHITA, KS			
New Operator's License No. 32864 / New Operator's Name & Address: XTO ENERGY INC.	Contact Person: BRENDA WALLER 405-319-3259			
	Phone:			
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: WGP-KHC LLC			
OKLAHOMA CITY, OK 73102	Date: 05/31/2013			
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u>			
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			
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.:			
Patri	Deter			
Date:	Date:			
	PRODUCTION 8.16.13 UIC 8-16-13			
2.0	tor District			

Side Two

W

Must Be Filed For All Wells

Lease Name	: USA WHITE B		Location: 3 26 35WSW			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
B2	15093205040000 /	/ 53 4 1342FSL	/5/8 FWL 1399FEL	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	FEUFWL		_	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
			FEL/FWL			
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		FSL/FNL				
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···			FEL/FWL			
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		FSL/FNL	FEL/FWL		RECEIVED	
		FSL/FNL	FEL/FWL		KANSAS CORPORATION COMMISSIO	
		FSL/FNL	FEL/FWL		JUN 1 8 2013 -	
		FSUFNL	FEL/FWL		CONSERVATION DIVISION WICHITA, KS	
		ECL (EN)	CELIENN			

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.

OPERATOR: License #5208	Well Location:
Name: EXXONMOBIL OIL CORPORATION	
Address 1: P. O. BOX 4358	County: Kearny
Address 2:	Lease Name: USA WHITE B Well #: B2
City: HOUSTON State: TX Zip:	
Contact Person: ADAM SCOTT	the fease below: T026S - R035W: SEC 003 All
Phone: { 713 431- 1859 Fax: { 71	3 431-1475
Email Address: <u>adam.e.scott@exxonmobil.con</u>	<u>n</u>
Surface Owner Information:	
Name: See Attached	When filling a Form 1-1 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:	and the second in the second and the manuscript have no second at the second traces were
City:State:Zip:	+
are preliminary non-binding estimates. The loc	tions of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat ations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
are preliminary non-binding estimates. The loc Select one of the following:	tions of lease roads, fank patteries, pipelines, and electrical lines. The locations shown of the plat lations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
are preliminary non-binding estimates. The loc Select one of the following: X I certify that, pursuant to the Kansas owner(s) of the land upon which the s CP-1 that I am filing in connection with	Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface ubject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form a this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this ss, phone number, fax, and email address.
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

CONSERVATION DIVISION WICHITA, KS

JUN 1 8 2013

Surface Owners

API#:	15093205040000	Lease Name: _	USA W	HITE B		Well #: B2		
Owner Name: WHITE ENTERPRISES INC								
	Address: 1878 ROAD 180							
	Address. 1070 ROAD 100							
	City: LAKIN	State:	KS	Zip: 67860				
	ner Name:							
	Address:							
	City:	State:		Zip:				
Own	ner Name:							
	Address:							
	City:	State:		Zip:				
Own	er Name:							
	Address:							
	City:	State:		Zip:				
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Own	er Name:							
	Address:							
	City:	State:		Zip:				
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RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS