KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 1-1 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 subn	nitted 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.: 207429				
Gas Gathering System:	•				
Saltwater Disposal Well - Permit No.:					
Spot Location: feet from N / S Line					
	Legal Description of Lease:				
Enhanced Recovery Project Permit No.:	T026S - R035W: SEC 016 All				
Entire Project: Yes No					
Number of Injection Wells **	County: Kearny Production Zone(s): COUNCIL GROVE Injection Zone(s):				
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE					
** Side Two Must Be Completed.					
Surface Pit Permit No.:	feet from N / S Line of Section				
(API No. If Drill Pit, WO or Haul)					
Type of Pit: Emergency Burn Settling	feet fromE /W Line of Section				
Type of Pit: Emergency Burn Settling	Haul-Off Workover OR Drilling				
Past Operator's License No. 5208	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				
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole				
New Operator's License No. 32864	Contact Person: BRENDA WALLER KANSAS CORPORATION COMMISSION				
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259				
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: WGP-KHC LLC				
OKLAHOMA CITY, OK 73102	Date: 05/31/2013 CONSERVATION DIVISION WICHITA, KS				
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	n 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:				
	Authorized Signature				
DISTRICT EPR _8// 5//3 Mail to: Past Operator New Operator	PRODUCTION 8.16.13 uic 8-16-13				

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

Side Two

Must Be Filed For All Wells

Lease Name	WHITE HEIRS	* Location: 16 26 35WSW				
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)	
A2	15093205140000 🗸	/907 1980FSL	3827 3960FEL	GAS	ACTIVE	
		FSL/FNL	FEUFWL			
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL	14.200		
		FSL/FNL	FEL/FWL			
		FSLIFNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		_	
	-	FSL/FNL	FEL/FWL			
		FSUFNL	FEL/FWL			
		FSL/FNL	FEL/FWL			

___ FSL/FNL _____ FEL/FWL _

FSL/FNL FEL/FWL

_____ FEL/FWL

FEL/FWL

_FEL/FWL

_FEL/FWL

_ FEL/FWL

___ FEL/FWL

_FSL/FNL _

FSL/FNL

FSL/FNL

FSL/FNL _

FSL/FNL ___

FSL/FNL

A separate sheet may be attached if necessary

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

RECEIVED
KANSAS CORPORATION COMMISSION

_FSL/FNL ______FEL/FWL _

^{*} 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.

KDOP #207420	RECEIVED KANSAS CORPORATION COMMISSI		
gent: M. Michael McNu	74 Title: Regional Land Manager		
e true and correct to the best	of my knowledge and belief.		
he \$30.00 handling fee with rm T-1, or Form CP-1 will be	this form. If the fee is not received with this form, the KSONA-1 returned.		
on to the surface owner(s).	ge that, because I have not provided this information, the onitigate the additional cost of the KCC performing this able to the KCC, which is enclosed with this form.		
at well is or will be located: 1 form; 2) if the form being file	e Bill 2032), I have provided the following to the surface) a copy of the Form C-1, Form CB-1, Form T-1, or Form d is a Form C-1 or Form CB-1, the plat(s) required by this address.		
i of lease roads, tank batterie	ction Borehole Intent), you must supply the surface owners and s, pipelines, and electrical lines. The locations shown on the plat m C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
+			
coun	y, and in the real estate property tax records of the county freasurer.		
	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		
was and a second When	rtiling a Form 1-1 involving multiple surface owners, attach an additional		
31-14/5	S - R035W. SEC 016 An		
the l	If filing a Form 1-1 for multiple wells on a lease, enter the legal description of the lease below: T026S - R035W: SEC 016 All		
4050			
	e Name: WHITE HEIRS Well #; A2		
	ky: Kearny		
whiteput?	SW Sec. 16 Twp.26 S. R. 35 Eas X West		
	Cour Lease 77210 + 4358		

JUN 1 8 2013

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

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#:_	15093205140000	_ Lease Name: WH	ITE HEIRS	Well #: <u>A2</u>
	er Name: WHITE DEVEI Address: 1580 HWY 50	RSIFIED LP		
	City: LAKIN	State: KS	Zip: 67860	
	er Name: Address:			
	City:	State:	Zip:	
	er Name: Address:			
	City:	State:	Zip:	
	er Name: Address:			
	City:	State:	Zip:	
	er Name: Address:			
	City:	State:	Zip:	

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013