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:	Med with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:		
X Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 204106		
Gas Gathering System:	Lease Name: H C WEAR		
Saltwater Disposal Well - Permit No.:	SE_sec24_Twp26_R36W		
Spot Location: feet from N / S Line	Legal Description of Lease:		
feet from E / W Line	T026S - R036W: SEC 024 All		
Enhanced Recovery Project Permit No.:	10263 - R03611. SEC 024 All		
Entire Project: Yes No			
Number of Injection Wells	County: Kearny		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE		
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.: (API No. If Drill Pit, WO or Haul)	leet from N / S Line ol Section		
(API NO. II DIIII PIL, WO UI FIBLI)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover O 2 Drilling		
F000 . /	LAURIE KILBRIDE		
Past Operator's License No. 5208 V	CORRECT PERSON:RECEIVED		
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 KANSAS CORPORATION COMMISSION		
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 JUN 1 8 2013		
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: <u>Andrew D. Cole</u> CONSERVATION DIVISION WICHITA, KS		
20004	BRENDA WALLER		
New Operator's License No. 32864 ✓	Contact Person: BRENDA WALLER		
New Operator's Name & Address: XTO ENERGY INC.	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 duty recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	on 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:			
	Date:		
Date:	Authorized Signature		
DISTRICT EPR 8/28/13	PRODUCTION 8-29.13 UIC 8-29-13		
Mail to: Past Operator New Ope	Mi-A-I-A		

Side Two

Must Be Filed For All Wells

Lease Name	H C WEAR		* Location: 24 26 36W 5 E				
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fo	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)		
1	15093005250000	2310FSL	2310FEL	GAS	ACTIVE		
	_						
	-	FSL/FNL	FEL/FWL				
		FSL/FNL	FEUFWL		_		
		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				
		FSL/FNL			_		
		FSL/FNL					
		FSL/FNL					
	Name of Control of the Control of th	CONTRACTOR OF THE PROPERTY OF	FEL/FWL	A STATE OF THE STA			
		FSL/FNL					
inderlander (2) - 10 " var benomten sprille gegegen gesting för gege		FSL/FNL			BOYSE STATE OF THE PROPERTY OF THE STATE OF		
		FSL/FNL		KAN	RECEIVED ISAS CORPORATION COMMISSIO		
		FSUFNL			JUN 1 8 2013		
					CONSERVATION DIVISION		
		FSL/FNL			- 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

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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Bo	rehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #5208	Well Location:				
Name: EXXONMOBIL OIL CORPORATION		SE Sec. 24 Twp.26 S. R. 36 Eas X West			
Address 1: P. O. BOX 4358		у			
Address 2:		H C WEAR Well #: 1			
City: HOUSTON State: TX Zip: 7725	10 ++ 4358 If filing a Form	T-1 for multiple wells on a lease, enter the legal description of			
Contact Person: ADAM SCOTT	TARCE BASE	the lease below: T026S - R036W: SEC 024 All			
Phone: { 713 431-1 859 Fax: { 713 431-1					
Email Address: adam.e.scott@exxonmobil.com					
Surface Owner Information:					
Name: See Attached	When filing a f	form F.1 involving multiple surface owners, attach an additional			
Address 1:	— owner informati	f 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 locations is Select one of the following:	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.			
I certify that, pursuant to the Kansas Surface owner(s) of the land upon which the subject to CP-1 that I am filing in connection with this for form; and 3) my operator name, address, pho-	well is or will be located: 1) a copy rm; 2) if the form being filed is a Fo	of the Form C-1, Form CB-1, Form 1-1, or Form orm C-1 or Form CB-1, the plat(s) required by this			
I have not provided this information to the surf KCC will be required to send this information task, I acknowledge that I am being charged a	to the surface owner(s). To mitiga	because I have not provided this information, the ate the additional cost of the KCC performing this he KCC, which is enclosed with this form.			
If choosing the second option, submit payment of the form and the associated Form C-1, Form CB-1, Form	\$30.00 handling fee with this form T-1, or Form CP-1 will be returned	n. If the fee is not received with this form, the KSONA-1 d.			
I hereby certify that the statements made herein are to	rue and correct to the best of my k	rrowledge and belief.			
Date: 6/15/2013 Signature of Operator or Age	ent:M. Michael McNulty	Title: Regional Land Manager			
API # :15093005250000	KDOR #204106	RECEIVED KANSAS CORPORATION COMMISSION			

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

JUN 1 8 2013

Surface Owners

API#:	15093005250000	Lease Name: _	H C WEAR		Well #:1	
Own	er Name: GUGELMEYER	, DAVID JON & CA	RYN JEAN			
	Address: 241 ROAD T					
	City: LAKIN	State:	KS Zip:	: 67860		
Owi	ner Name: Address:					
	City:	State:	Zij	o:		
Owi	ner Name: Address:					
	City:	State	: Zip	:		
	ner Name: Address:					
	City:	State:	Zip	:		
Owr	ner Name: Address:					
	City:	State	: Zip) :		

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS