### 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,
MUST be submitted with this form

Check Applicable Boxes:	1		
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.: 201906		
Gas Gathering System:	Lease Name: HOSKINSON		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
teet from	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T023S - R032W: SEC 013 All		
Entire Project: Yes No			
Number of Injection Wells **	County: Finney		
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 Heul)	leet from N / S Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover 🔾 🗍 Drilling		
5200			
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:Audrew D. Cole		
New Operator's License No. 32864	Contact Person: BRENDA WALLER RECEIVED KANSAS CORPORATION COMMISS		
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259		
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES JUN 1 8 2013		
OKLAHOMA CITY, OK 73102	Dale: 05/31/2013 CONSERVATION DIVISION WICHITA. KS		
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas 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		
is acknowledged as	is acknowledged as		
the new operator and may continue to inject fluids as authorized by  Permit No.: Recommended action:	the new operator of the above named lease containing the surface pit permitted by No.:		
Date:	Date:		
DISTRICT EPR	PRODUCTION 8-30.1.3 uic 8-30-13		
Mail to: Past OperatorNew Operator			

#### Side Two

### Must Be Filed For All Wells

Lease Name:	HOSKINSON		* Location: 13 23 32WSW				
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet)	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandon		
1	15055007620000	1320FSL	3930 1960FEL	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				
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		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL _	KANSA	RECEIVED S C <del>ORPORATION COMMISSION</del>		
		FSL/FNL	FEL/FWL _		JUN 1 8 2013		
		FSUFNL	FEL/FWL _	(	CONSERVATION DIVISION WICHITA KS		

A superate sneat may be attached it necessary

<sup>\*</sup> 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 CORPOR	RATION	SW Sec. 13 Twp.23 S. R. 32 Eas X West
Address 1: P. O. BOX 4358		County: Finney
Address 2:		Lease Name: HOSKINSON Well #: 1
City: HOUSTON State:	TXZip:77210 ++4358	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT		ine rease delow;
Phone: ( 713 431-) 8759		T023S - R032W: SEC 013 All
Email Address: adam.e.scott@exxo	nmobil.com	-
Surface Owner Information:		
Name: See Attached	and the second section from the second section of the section	When filing a Form T.1 involving multiple surface owners, attach an additional
Address 1:		sheet listing all of the information to the left for each surface owner. Surface
Address 2:		
City:State:		
Select one of the following:	ŕ	on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
CP-1 that I am filing in connections; and 3) my operator name	ction with this form; 2) if the form ie, address, phone number, fax,	
		acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this g fee, payable to the KCC, which is enclosed with this form.
choosing the second option, submit form and the associated Form C-1, Fo	payment of the \$30.00 handlin orm CB-1. Form T-1, or Form CF	g fee with this form. If the fee is not received with this form, the KSONA-1 2-1 will be returned.
hereby certify that the statements ma	ade herein are true and correct t	o the best of my knowledge and belief.
0/45/0040		ad Willuty Tille: Regional Land Manager
	<u>-</u>	1 000,

JUN 1 8 2013

### **Surface Owners**

API#:	15055007620000	Lease Name: _	HOSKINSON	l	Well #: <u>1</u>	
Own	er Name: BOYD, TERRY & Address: 4755 E LOWE RD City: GARDEN CITY	CHERYLENE TRU State:		67846-9374		
	er Name: Address: City:	State:	Zip:			
	r Name: ddress: City:	State:	Zip:			
	Name: Idress: City:	State:	Zip:			
Owner Ad	Name: dress: City:	State:	Zip:			

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS