KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

larch 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: Oil Lease: No. of Oil Wells 7/1/2013 Effective Date of Transfer: Gas Lease: No. of Gas Wells . KS Dept of Revenue Lease No.: _ 212824 Gas Gathering System:_ Lease Name: JOHN W LAN Saltwater Disposal Well - Permit No.: _feetfrom N/ SLine Legal Description of Lease: _ feet from 🔲 E / 🔲 W Line T025S - R034W: SEC 024 All Enhanced Recovery Project Permit No.: _ Entire Project: Yes No Number of Injection Wells. County: Finney Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE **COUNCIL GROVE** Production Zone(s):___ ** Side Two Must Be Completed. Injection Zone(s):_ Surface Pit Permit No.: _ leet from N / S Line of Section (API No. If Drill Pit, WO or Haul) feet from | E / | W Line of Section Type of Pit: Emergency Haul-Off Workover / Drilling Past Operator's License No. 5208 **LAURIE KILBRIDE** Contact Person: Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: _713-431-1182 KANSAS CORPORATION COMMISSION P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** IUN 1 8 2013 Signature: Andrew D. Cole CONSERVATION DIVISION WICHITA, KS **BRENDA WALLER** New Operator's License No. Contact Person: New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: WGP-KHC LLC 05/31/2013 OKLAHOMA CITY, OK 73102 Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultze Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #..... has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit. 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 _____. Recommended action: permitted by No.: ___ Date: Authorized Signature DISTRICT -

New Operator

Mail to: Past Operator_

PRODUCTION

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 212824	√

* Lease Name:	JOHN W LAN API No. (YR DRLD/PRE '67) 150552061600000	* Location: 24 26 34W N/ W				
Well No.		Foolage from (i.e. FSL = Feet f	Foolage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/Ta'D/Abandoned)	
		2790FSL	2780FEL	GAS	ACTIVE	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
H		FSL/FNL	FEL/FWL			
	190	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			
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	tele management		7 667 776			
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1000		FSL/FNL	FEL/FWL	71.4	JUN 1 8 2013	
		FSL/FNL	FEL/FWL	4	CONSERVATION DIVISION WICHITA, KS	
		FSL/FNL	FEL/FWL		-	

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	d: C-1 (Intent) CB-1 (Cathodic Prote	(dion Boxehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 5208		cation:
Name: EXXONMOBIL OIL CORPORATION		NW_Sec.24 Twp.26 S. R.34Eas X West
Address 1: P. O. BOX 4358	County	Finney
Address 2:	-	Jame: JOHN W LAN Well #: 2
City: HOUSTON State: TX	4050	Form 1-1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	the leas	e below:
Phone: (713 431-/859 Fax: (_	713 431-1475 T025S	- R034W: SEC 024 All
Email Address: adam.e.scott@exxonmobil.		
Surface Owner Information:		
Name: See Attached	When fi	ing a Form T.1 involving multiple surface owners, attach an additional
Address 1:	sheet lis	ting all of the information to the left for each surface owner. Surface formation can be found in the records of the register of deeds for the
Address 2:		normalitor can be ittoric in the records of the register or deeds for the and in the real estate property tax records of the county treasurer.
City: State: 7	7in: +	
are preliminary non-binding estimates. The Select one of the following:	locations may be entered on the Form	pipelines, and electrical lines. The locations shown on the plat C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the CP-1 that I am filing in connection w form; and 3) my operator name, add	e subject well is or will be located: 1) a fith this form; 2) if the form being filed it ress, phone number, fax, and email ad to the surface owner(s), I acknowledge	that, because I have not provided this information, the
KCC will be required to send this in	formation to the surface owner(s). To (mitigate the additional cost of the KCC performing this e to the KCC, which is enclosed with this form.
If choosing the second option, submit paym form and the associated Form C-1, Form CE	ent of the \$30.00 handling fee with this 3-1, Form T-1, or Form CP-1 will be ret	form. If the fee is not received with this form, the KSONA-1 irned.
I hereby certify that the statements made he	rein are true and correct to the best of	my knowledge and belief.
Date. 6/15/2013 Signature of Opera	ator or Agent: M. Michael Minulty	Tifle: Regional Land Manager
API # :15055206160000	KDOR #212824	RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

Surface Owners

API#:	15055206160000	Lease Name: _	JOHN W LAN	I	Well #: _2		
Own	Owner Name: LOEWEN, JOHAN P						
	Address: PO BOX 1098						
	City: SUBLETTE	State:	KS Zip:	67877-1098			
	er Name: Address:						
	City:	State:	Zip:				
	er Name:						
4	Address: City:	State:	Zip:				
	r Name: Address:						
	City:	State:	Zip:				
	r Name: .ddress:						
	City:	State:	Zip:				

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013 CONSERVATION DIVISION WICHITA, KS