### 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: MUST be submit	itted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 7/1/2013
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 203879
Gas Gathering System:	Lease Name: TATE ESTATE
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.:	T025S - R035W: SEC 016 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 of Section
	feet from E / W Line of Section
Type of Pit: Emergency Bum Settling	Haul-Off Workover OC Drilling
Past Operator's License No5208 V	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: <u>Andrew D. Cole</u>
	RECEIVED  KANSAS CORPORATION COMMISSIO
New Operator's License No. 32864	Contact Person: BRENDA WALLER JUN 1 8 2013
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259 CONSERVATION DIVISION
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: WGP-KHC LLC WICHITA, KS
OKLAHOMA CITY, OK 73102	Date: 05/31/2013
Title: _ SR. OPERATIONS VICE PRESIDENT	Signature: Douglas Q. Schultze
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #has been
	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	•
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:
The state of the s	Authorized Signature
	PRODUCTION 8.29.13 uic 8-29-13
Mail to: Past Operator New Operate	or District

#### Side Two

#### Must Be Filed For All Wells

	TATE ESTATE			e se semol	
Lease Name:	INIE LOINIE		Location: 1	0 40 30W3C	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Section Line from South Line)	Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
B1	15093002790000	2640FSL	2640FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEL/FWL		<del>-</del>
		FSL/FNL	FEL/FWL	***************************************	
		FSUFNL	FEUFWL		
		FSL/FNL	FEL/FWL		•
		FSL/FNL	FEL/FWL	Wh	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEU/FWL	And the second s	
		FSL/FNL	FEL/FWL		
MANAGEM AND		FSL/FNL	FEL/FWL	MANUAL (1912/1916) SA SA SA LOLL AL ARLICO MANUAL ALLA CARACTERIA	
		FSL/FNL	FEL/FWL		
ern <del>anne Water felle of the Constant of the Cons</del> tant of the Constant of the		FSLÆNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL	к	RECEIVED ANSAS CORPORATION COMMISSI
		FSL/FNL			JUN 1 8 2013
					CONSERVATION DIVISION

A separate sheet may be attached if necessary

\_\_\_\_\_FSL/FNL \_\_\_\_\_FEL/FWL \_

WICHITA, KS

<sup>&</sup>quot;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 K90NA-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 E	Boxehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 5208		Well Location:		
Name: EXXONMOBIL OIL CORPORA	TION	<u>SE</u> Sec. <u>16</u> Twp.25 S. R. 35 Eas X West		
Address 1: P. O. BOX 4358		rny		
Address 2:	Lease Name	TATE ESTATE Well #: B1		
City: HOUSTON State: TX	Zip:	n T-1 for multiple wells on a lease, enter the legal description o		
Contact Person: ADAM SCOTT	the lease bel	the lease below: T025S - R035W: SEC 016 All		
Phone: ( 713 431-   864 Fa	×: { 713 431-1475	5W: 5EC 016 All		
Email Address: adam.e.scott@exxonm	lobil.com			
Surface Owner Information:				
Name: See Attached	When filing a	When filing a Form T-1 involving multiple surface owners, attach an addition		
Address 1:		alf of the information to the left for each surface owner. Surface ation can be found in the records of the register of deeds for the		
Address 2:		the real estate property tax records of the county treasurer.		
City: State:	Zip:+			
Select one of the following:  X I certify that, pursuant to the Kowner(s) of the land upon which CP-1 that I am filing in connect form; and 3) my operator name  I have not provided this information of the land upon which CP-1 that I am filing in connect form; and 3) my operator name	Kansas Surface Owner Notice Act (House Bill 2) th the subject well is or will be located: 1) a copy ion with this form; 2) if the form being filed is a File address, phone number, fax, and email addres ation to the surface owner(s). I acknowledge that	, because I have not provided this information, the ate the additional cost of the KCC performing this		
	payment of the \$30.00 handling fee with this form om CB-1, Form T-1, or Form CP-1 will be returned	m. If the fee is not received with this form, the KSONA-1 d.		
I hereby certify that the statements mad	de herein are true and correct to the best of my k	snowledge and belief.		
Date: 6/15/2013 Signature of	Operator or Agent:	Tille: Regional Land Manager		
API#:15093002790000	KDOR #203879	RECEIVED KANSAS CORPORATION COMMISSION		

JUN 1 8 2013

### **Surface Owners**

API#:	15093002790000	Lease Name: _	TATE ESTATE	Well #: <u>B1</u>		
Owner Name: GRAHAM FARMS INC						
	Address: 2150 RD 220					
	City: DEERFIELD	State:	KS <b>Zip</b> : 67838			
Owr	ner Name:					
	Address:					
	City:	State:	Zip:			
	er Name:					
	Address: City:	State:	Zip:			
Own	er Name:					
	Address:					
	City:	State:	Zip:			
	er Name: Address:					
	City:	State:	Zip:			

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JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS