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:	67 be submitted with this form.
Oil Lease: No. of Oil Wells ** X Gas Lease: No. of Gas Wells 1	Effective Date of Transfer: 7/1/2013 KS Dept of Revenue Lease No.: 201595
Gas Gathering System:	I LOSSO NAMO- A VIIVII
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S	
feet from E / W	
Enhanced Recovery Project Permit No.:	T027S - R036W: SEC 031 All
Entire Project: Yes No	
Number of Injection Wells **	County: Grant
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. II Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settlin	feet from N / S Line of Section Leet from E / W Line of Section Mg Haul-Off Workover Drilling
Past Operator's License No. 5208	Contact Person: LAURIE KILBRIDE RECEIVED
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATIO	N Phone: 713-431-1182
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 JUN 1 8 2013
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole CONSERVATION DIVISION WICHITA, KS
New Operator's License No. 32864	Contact Person: BRENDA WALLER
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
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze
	of injection authorization, surface pit permit #has been Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation erest in the above injection well(s) or pit permit.
is acknowle	edged as is acknowledged as
the new operator and may continue to inject fluids as author	orized by the new operator of the above named lease containing the surface pit
Permit No.: Recommended action:	permitted by No.:
Date:	
Authorized Signature /	/ Authorized Signature
DISTRICT EPR $\frac{D/8}{}$	13 PRODUCTION 10-21-13 UIC 10-21-13
Mail to: Past Operator/	New Operator District

Side Two

Must Be Filed For All Wells

Lease Name	. A W HUNT	*Location: 31 27 36W SE				
Well No.	API No. (YR DRLD/PRE '67)	Foolage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
1	15067002660000	23/0 1960FSL	33/0 4980FEL	GAS	ACTIVE	
		FSL/FNL	FEL/FWL	- William Committee of the Committee of	The second secon	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	THAN		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		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			
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		FSL/FNL	Science Selv Selves Secondary apply 1999	electronical de maria en la internación de la electronica del electronica de la electronica del electronica de la electronica de la electronica de la electr		
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		FSL/FNL			RECEIVED KANSAS CORPORATION COMMISS	
		FSL/FNL				
		FSL/FNL	FEL/FWL			
Patricia de la constantina della constantina del	The state of the s	FSL/FNL	FEL/FWL	N	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.

OPERATOR: License # 5208	Well Location:	<u> </u>			
Name: EXXONMOBIL OIL CORPORATION	<u></u>	Sec. 31 Twp.27 S. R. 36 Eas X West			
Address 1: P. O. BOX 4358	County: Grant				
Address 2:	Lease Name: <u>AW F</u>	HUNT Well #: 1			
State: TX Zip: 77210 ++ 4	358 If filing a Form T-1 to	or multiple wells on a lease, enter the legal description of			
Contact Person: ADAM SCOTT	the lease below:				
Phone: (713 431-1859 Fax: (713 431-1475	10275 - R036W; 5E				
mail Address: adam.e.scott@exxonmobil.com					
Surface Owner Information:					
Vame: See Attached	140 55 5				
	sheet listing all of the	When filing a Form 1.1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface			
Address 1:	OFFICE WAS INDESTRUCTED	owner information can be tound in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.			
Address 2: State: Zip:+	and have supplied in A confidence continued and supplied in the co	in estate property tax records or the county freestater.			
		· · · · · · · · · · · · · · · · · · ·			
If this form is being submitted with a Form C-1 (Intent) or CB- the KCC with a plat showing the predicted locations of lease ro are preliminary non-binding estimates. The locations may be e	pads, tank batteries, pipelines, a	nd electrical lines. The locations shown on the plat			
Select one of the following:					
I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if t form; and 3) my operator name, address, phone numb	will be located: 1) a copy of the the form being filed is a Form C	e Form C-1, Form CB-1, Form T-1, or Form			
I have not provided this information to the surface own KCC will be required to send this information to the stask, I acknowledge that I am being charged a \$30.00	urface owner(s). To mitigate the	e additional cost of the KCC performing this			
f choosing the second option, submit payment of the \$30.00 form and the associated Form C-1, Form CB-1, Form T-1, or F		he fee is not received with this form, the KSONA-1			
hereby certify that the statements made herein are true and o	correct to the best of my knowle	dge and belief.			
Date: 6/15/2013 Signature of Operator or Agent: 7/	l. Michael McNulty	Title: Regional Land Manager			

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

CONSERVATION DIVISION WICHITA, KS

JUN 1 8 2013

Surface Owners

API#:	1506700	2660000	Lease Name:	AWH	UNT		Well #: _1	
							: 4.	
Own	er Name:	HUNT, JESSIE AN	NN TRUST, ETAL					
	Address:	11516 NICHOLAS	ST #100					
	City:	OMAHA	State:	NE	Zip:	68154		
	ner 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

CONSERVATION DIVISION WICHITA, KS