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:	igo with this ioth.		
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.: 200061		
Gas Gathering System:	Lease Name: ALDERMAN		
Saltwater Disposal Well - Permit No.:	<u>sw.sec.</u> <u>11 Twp.</u> <u>33 R.</u> <u>35W</u> [E X]W		
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: T033S - R035W: SEC 011 All		
Enhanced Recovery Project Permit No.:	10335 - R039W: SEC 011 All		
Entire Project: Yes No			
Number of Injection Wells***	County: Stevens Production Zone(s): CHASE		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE			
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:(API No. If Drill Pit, WO or Haul)	test from N / S Line of Section		
protest protest	feet from E / W Line of Section		
Type of Pit: Emergency Bum Settling	Haul-Off Workover Drilling		
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 KCC WICHITA		
	Valor.		
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Audrew D. Cole JUN 18 2013		
	RECEIVED		
New Operator's License No	Contact Person: BRENDA WALLER		
New Operator's Name & Address: XTO ENERGY INC.	Phone:405-319-3259		
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES		
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			
	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	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:		
Authorized Signature /	Authorized Signature		
DISTRICT EPR /0/15/13	PRODUCTION 10.17.13 UIC 10-16-13		
Mail to: Past Operator New Opera	tor District		

Side Two

Must Be Filed For All Wells

ease Name	. ALDERMAN		* Location: 11 33 35WSW			
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr	Foolage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned	
1	15189003340000	2540FSL	2540FEL	GAS	ACTIVE	
		FSUFNL	FEL/FWL			
			FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSUFNL	FEUFWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL				
		FSL/FNL				
والمتعادلة						
		FSL/FNL	FEL/FWL	The second secon		
		FSUFNL	FEL/FWL			
Magagadalahan Menengan Maran di Amar		NAME OF THE PROPERTY OF THE PR	FEL/FWL	************************************	took sendoppelations, pro- a resident blood blood behalf about the specimen	
		FSL/FNL	FEL/FWL			
		FSL/FNU	FEL/FWL		KCE WICHITA	
		FSL/FNL	FEL/FWL		JUN 18 2013	
Management - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			FEL/FWL		RECEIVED	
		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 hisy 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 CORPORATION	an production of the contract	. SW Sec. 11 Twp.33 S. R. 35 Eas X West
Address 1: P. O. BOX 4358		ns .
Address 2:		ALDERMAN Well #: 1
City: HOUSTON State: TX /	#f= (landa.	Til for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	the lease below T033S - R035N	sy: W: SEC 011 All
Phone: (713 431-1 85)		
Email Address: adam.e.scott@exxonmobil.c	om	
Surface Owner Information:		
Name: See Attached	chapt liction all	form 1.1 involving multiple surface owners, attach an additional For the information to the left for each surface owner. Surface
Address 1:	awner informat	tion can be found in the records of the register of deeds for the
Address 2:	The state of the s	the real estate property tax records of the county treasurer.
City: State: 7	(ip:+	
owner(s) of the land upon which the CP-1 that I am filing in connection was form; and 3) my operator name, add I have not provided this information KCC will be required to send this in	e subject well is or will be located: 1) a copy with this form; 2) if the form being filed is a Fodiress, phone number, fax, and email address 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
If choosing the second option, submit payn form and the associated Form C-1, Form C	nent of the \$30.00 handling fee with this form B-1, 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 h	erein are true and correct to the best of my k	nowledge and belief
Date: 6/15/2013 Signature of Ope	rator or Agent:	Tille: Regional Land Manager
API # :15189003340000	KDOR #200061	KCC WICHITA
		JUN 18 2013

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

RECEIVED

Surface Owners

API#: 15189003340000	Lease Name: ALDE	ERMAN	Well #: _1	
Owner Name: AD ASTRA A	G LLC			
Address: PO BOX 914				
City: JOHNSON	State: KS	Zip: 67855		
Owner Name:				
Address:				
City:	State:	Zip:		
Owner Name:				
Address:				
City:	State:	Zip:		
Owner Name: Address:				
City:	State:	Zip:		
Oursen Norse				
Owner Name: Address:				
City:	State:	Zip:		

JUN 18 2013
RECEIVED