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 subs | mitted with this form. | | |
|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Oil Lease: No. of Oil Wells | Effective Date of Transfer: KS Dept of Revenue Lease No.: 208388 Lease Name: BARNGROVER | | |
| Surface Pit Permit No.: | leet from N / S Line of Section | | |
| (API No. II Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling | ☐ Haul-Off ☐ Workover ☐ ☐ Drilling | | |
| Past Operator's License No | Contact Person: LAURIE KILBRIDE | | |
| Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION | RECEIVED | | |
| P. O. BOX 4358, HOUSTON, TX 77210-4358 | ASISTANDAS | | |
| Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT | Date: USISTIZUTS Signature: Andrew D. Cole CONSERVATION DIVISION | | |
| New Operator's License No32864 | 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: Douglas C. Schultze | | |
| | authorization, surface pit permit #has been Commission. This acknowledgment of transfer pertains to Kansas Corporation above injection well(s) or pit permit. | | |
| is acknowledged as | is acknowledged as | | |
| the new operator and may continue to inject Iluids 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 OCT 3 0 2013 UIC 10-30-13 | | |
| Mail to: Past Operator New Operat | | | |

Must Be Filed For All Wells

| Lease Name: BARNGROVER | | | Location: 3 | *Location: 3 32 36W SZ | | |
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| Weli No. | API No. (YR DRLD/PRE '67) | Footage from | Footage from Section Line (i.e. FSL = Feet from South Line) | | Well Status (PROD/TA'D/Abandoned) | |
| 12 | 15189203870000 🗸 | /28/ 4220FSL | 2775 2040FEL | GAS | ACTIVE | |
| | | FSL/FNL | | | • | |
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A separate sheet may be attached if necessary

_FSL/FNL _

_FSL/FNL __

_FSL/FNL ______FEL/FWL

_____FEL/FWL

_ FEL/FWL

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

^{*} 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 Pluiging 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 (C | Cathodic Protection Boxehole Intent) XT-1 (Transfer) CP-1 (Plugging Application) | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| OPERATOR: License #5208 | Well Location: | | |
| Name: EXXONMOBIL OIL CORPORATION | <u>S2Sec.3Twp.32SR.36</u> Eas (X) West | | |
| Address 1: P. O. BOX 4358 | County: Stevens | | |
| Address 2: | Lease Name: BARNGROVER Well #: 12 | | |
| City: HOUSTON State: TX Zip: 77210 + 4358 Contact Person: ADAM SCOTT | If filing a Form 1-1 for multiple wells on a lease, enter the legal description of the lease below: T032S - R036W: SEC 003 S2 N2, S2 (NENE) (NWNE) (NENW) (NWNW) | | |
| Phone: { 713 431-1859 Fax: (713 431-1475 | | | |
| Email Address: adam.e.scott@exxonmobil.com | () | | |
| Surface Owner Information: | | | |
| Name: See Attached | When filing a Form 1.1 involving multiple surface owners, attach an additional | | |
| Address 1: | sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the | | |
| Address 2: | county, and in the real estate property tax records of the county treasurer. | | |
| City: State: 7ip:+ | | | |
| the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be location of the land upon which this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, and | of the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Ct (House Bill 2032), I have provided the following to the surface cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form seing filed is a Form C-1 or Form CB-1, the plat(s) required by this | | |
| | knowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form. | | |
| If choosing the second option, submit payment of the \$30,00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 | fee with this form. If the fee is not received with this form, the KSONA-1 I will be returned. | | |
| I hereby certify that the statements made herein are true and correct to t | the best of my knowledge and belief. | | |
| Date: 6/15/2013 Signature of Operator or Agent: W. Wickard | Title: Regional Land Manager | | |
| | | | |

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

KDOR #208388

API #:15189203870000

JUN 1 8 2013

RECEIVED KANSAS CORPORATION COMMISSION

Surface Owners

Address:

City:

API#: 15189203870000 **BARNGROVER** Lease Name: **Owner Name: MONICA, MARSHA DIXON** Address: 12913 CANTERBURY RD City: LEAWOOD State: KS **Zip:** 66209-1767 **Owner Name:** Address: City: State: Zip: Owner Name: Address: City: State: Zip: Owner Name: Address: City: State: Zip: Owner Name:

State:

Zip:

Maria

Well #: __1--2

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS