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:	led with this iorin.			
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.: 221632			
Gas Gathering System:	Lease Name: BROADHURST			
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.:	T026S - R037W: SEC 036 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			
Type of Pit: Emergency Burn Settling	Haul-Off Workover OR 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	05/24/2012			
	Vale:			
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: <u>Andrew D. Cole</u> RECEIVED			
	KANSAS CORPORATION COMMISSION			
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			
210 PARK AVENUE, SUITE 2350	CONSERVATION DIVISION Oil / Gas Purchaser: ONEOK FIELD SERVICES WICHITA, KS			
	Dale: 05/31/2013			
OKLAHOMA CITY, OK 73102	Vaid.			
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze			
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duty recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation			
is acknowledged as	is acknowledged as			
the new operator and may continue to inject Iluids as authorized by	the new operator of the above named lease containing the surface pit			
the tiest obstitute and may consider to milest make as acquaines at				
Permit No.: Recommended action:	permitted by No.:			
Permit No.: Recommended action:	permitted by No.:			
	Date:			
Date:	Date:			
Date:	PRODUCTION CCT 2 3 2013 UIC 10-23-(3			

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

Side Two

Must Be Filed For All Wells

Lease Name	BROADHURST		Location: 36 26 37W NE					
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr	Section Line rom South Line)	Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)			
36 INF		2040FNU-	1250FEL	GAS	ACTIVE			
		FSL/FNL	FEL/FWL	-				
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSUFNL	FEL/FWL					
		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	FEL/FWL					
		FSL/FNL	- FEUFWL	The control of the co	WINDOWS BY THE STATE OF THE STA			
The commence of the commence o		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL	KA	RECEIVED NSAS CORPORATION COMMISSION			
		FSL/FNL			JUN 1 8 2013			
		FSL/FNL			CONSERVATION DIVISION WICHITA, KS			

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:	Sec. 36 Twp.26 S. R. 37 Eas X West			
Name: EXXONMOBIL OIL CORPORATION	Commence of which is a support of the continuent of continuent				
Address 1: P. O. BOX 4358		DHURST Well #: 3-6 INF			
Address 2:					
City: HOUSTON State: TX	Phys. ferrocas Ingshrige	multiple wells on a lease, enter the legal description of			
Contact Person: ADAM SCOTT	713 431-1475 T026S - R037W: SEC	C 036 All			
Phone; (713 431-1850 Fax:					
Email Address: adam.e.scott@exxonmo	bii.com				
Surface Owner Information:					
Name: See Attached	When filing a Form T-	When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface			
Address 1:		n be found in the records of the register of deeds for the			
Address 2:	Control of the Management of the Control of the Con	of estate property tax records of the county treasurer.			
City: State:	Xib:+				
are preliminary non-binding estimates.	ed locations of lease roads, tank batteries, pipelines, ar The locations may be entered on the Form C-1 plat, For	rm C6- i piat, di a separate piat may be submitted.			
owner(s) of the land upon which	ansas Surface Owner Notice Act (House Bill 2032), I h the subject well is or will be located: 1) a copy of the on with this form; 2) if the form being filed is a Form C- address, phone number, fax, and email address.	e Form C+1. Form CB+1, Form 1+1, OLFOID			
CC will be required to send th	tion to the surface owner(s). I acknowledge that, because is information to the surface owner(s). To mitigate the eing charged a \$30.00 handling fee, payable to the KC	e agginonal cost of the NCC periorning this			
If choosing the second option, submit p form and the associated Form C-1, For	payment of the \$30.00 handling fee with this form. If the CB-1, Form T-1, or Form CP-1 will be returned.	he fee is not received with this form, the KSONA-1			
I hereby certify that the statements mad	de herein are true and correct to the best of my knowle	edge and belief.			
Date: 6/15/2013 Signature of	Operator or Agent:	Tille: Regional Land Manager			
API # :15093215280001	KDOR #221632	RECEIVED KANSAS CORPORATION COMMISSION			

JUN 1 8 2013

Surface Owners

API#:	1509321	5280001	Lease Name:	BROADHURST			Well #:	3-6 INF	
Own	er Name:	BROADHURST F	OUNDATION						
	Address:	1630 SOUTH BOS	STON AVE						
	City:	TULSA	State:	OK	Zip:	74119			
Owi	ner Name: Address:								
	City:		State:		Zip:				
	ner 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