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:	nac van one wan. 1		
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.: 200140		
Gas Gathering System:	Lease Name: BURR		
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.:	T027S - R036W: SEC 007 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)	feet from N / S Line of Section		
Type of Pit: Emergency Bum Settling	Haul-Off Workover O Drilling		
Past Operator's License No	RECEIVED Contact Person: LAURIE KILBRIDE KANSAS CORPORATION COMMISSION		
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 JUN 1 8 2013		
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013		
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole 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	Oate: 05/31/2013		
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u>		
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 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:		
	PRODUCTION 10-21-13 UIC 10-21-13		
Mail to: Past Operator New Operator	• • •		

Side Two

Must Be Filed For All Wells

* Lease Name:	BURR		* Location: 7 27 36W SE			
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet t	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)	
1		2310FSL	2310FEL	GAS	ACTIVE	
				1242		
		FSL/FNL	FEL/FWL	490 the contract of the contra	· · · · · · · · · · · · · · · · · · ·	
		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	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWI			
			FEL/FWL			
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		FSL/FNL	FEL/FWL		RECEIVED (ANSAS CORPORATION COMMISSIO	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		JUN 1 8 2013 CONSERVATION DIVISION	
		FSL/FNL	FEL/FWL		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.

Select the corresponding form being filed:C-1 (Intent)	CB-1 (Cathodic Protection Borehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License #5208	Well Location:
Name: EXXONMOBIL OIL CORPORATION	
Address 1: P. O. BOX 4358	
Address 2:	Lease Name: BURR Well #: 1
City: HOUSTON State: TX Zip: 77210 + 4	358 If filing a Form T-1 for 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	T027S - R036W: SEC 007 All
Email Address: adam.e.scott@exxonmobil.com	
Surface Owner Information:	
Name: See Attached	
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:	
City: State: Zip:+	
Select one of the following:	entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is or	Notice Act (House Bill 2032), I have provided the following to the surface r will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this per, fax, and email address.
KCC will be required to send this information to the se	ner(s). I acknowledge that, because I have not provided this information, the urface owner(s). To mitigate the additional cost of the KCC performing this behandling fee, payable to the KCC, which is enclosed with this form.
If 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	handling fee with this form. If the fee is not received with this form, the KSONA-1 Form CP-1 will be returned.
I hereby certify that the statements made herein are true and o	correct to the best of my knowledge and belief.
Date: 6/15/2013 Signature of Operator or Agent: 7/	C. Mickael McNulty Title: Regional Land Manager
API # :15067002500000 KDOR	#200140 RECEIVED KANSAS CORPORATION COMMISSION

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#: 150670		02500000	Lease Name: _	BURR			Well #:1			
Owner Name: HOWARD, GARY T & SAUNDRA K, JT										
	Address:	100 E KING TER	R.							
	City:	ULYSSES	State:	KS	Zip:	67880				
	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