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 form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:
Gas Lease: No. of Gas Wells "	KS Dept of Revenue Lease No.: 207385
Gas Gathering System:	Lease Name: C F PATTERSON
Saltwater Disposal Well - Permit No.:	SW Sec. 14 Two. 28 R. 37W FEXIW
Spot Location: feet from N / S Line	
feet from \square E / \square W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T028S - R037W: SEC 014 Ali
Entire Project: Yes No	
Number of Injection Wells**	County: Grant
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE
** Side Two Must Be Completed.	
Gide i no mest de Competat.	Injection Zone(s):
Surface Pit Permit No.:	leet from N / S Line of Section
(API No. II Drill PIL, WO or Hearl)	feet from
Type of Pit: Emergency Burn Settling	
Type of Pit: Emergency Burn Settling	Haul-Off Workover Of 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
TIND. RSO MANAGER/AGENT & ATTORNEY-IN-FACT	RECEIVED
Title:	Signature: Andrew D. Cole KANSAS CORPORATION COMMISSION
	JUN 1 8 2013
New Operator's License No. 32864	Contact Person: BRENDA WALLER
New Operator's Name & Address: XTO ENERGY INC.	CONSERVATION DIVISION Phone: 405-319-3259 WICHITA, KS
210 PARK AVENUE, SUITE 2360	Oil / Gas Purchaser: _ WGP-KHC LLC
	05/94/0049
OKLAHOMA CITY, OK 73102	Vale.
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u>
Acknowledgment of Transfer: The above request for transfer of injection and noted, approved and duly 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 pfi
Permit No.: Recommended action:	permitted by No.:
Date:	Date:
Authorized Signature	Authorized Signature
1 ' / /	PRODUCTION 10-21-13 uic 10-21-13
Mail to: Past Operator New Operator	or District

Side Two

Must Be Filed For All Wells

	▼
	207385
KDOR Lease No.: _	207365
KUUR Lease NU.	

* Lease Name:	C F PATTERSON	* Location: 14 28 37WSW			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
2	15067202040000 /	1320FSL	3960FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		4
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL			
ACCOUNT OF THE PARTY OF THE PAR		FSL/FNL			
		FSL/FNL			
		FSL/FNL		KANSAS CO	RECEIVED ORPORATION COMMISSION
		FSL/FNL			UN 1 8 2013
With an area of the second		FSL/FNL		COI	NSERVATION DIVISION

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:SW_Sec.14Twp.28SR.37EastX_West
Name: EXXONMOBIL OIL CORPORATION	Address Communication Communic
Address 1: P. O. BOX 4358	County: Grant Lease Name: C F PATTERSON Well #: 2
Address 2:	
State: TX Zip:	
Contact Person: ADAM SCOTT	TAGE DASTNI, SEC MA All
Phone: (713 /31-1259 Fax: (713	
Email Address: adam.e.scott@exxonmobil.com	
Surface Owner Information:	
Vame: See Attached	When filing a Form T.1 involving multiple surface owners, attach an additional
Address 1:	Child highiddlet can be recipe in the recessor of the reducer or decay in the
Address 2:	county, and in the real estate property tax records of the county freasurer.
City: State: Zlp:	+
Select one of the following:	ions may be 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 sub	urface Owner Notice Act (House Bill 2032). I have provided the following to the surface bject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form his form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this , phone number, fax, and email address.
owner(s) of the land upon which the sub CP-1 that I am filing in connection with the form; and 3) my operator name, address I have not provided this information to the KCC will be required to send this information.	bject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form his form: 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
owner(s) of the land upon which the sub CP-1 that I am filing in connection with the form; and 3) my operator name, address I have not provided this information to the KCC will be required to send this inform task, I acknowledge that I am being chart the second option, submit payment of the choosing the second option, submit payment of the second option.	bject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form his form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this phone number, fax, and email address. I acknowledge that, because I have not provided this information, the lation to the surface owner(s). To mitigate the additional cost of the KCC performing this riged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.
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owner(s) of the land upon which the sub CP-1 that I am filing in connection with the form; and 3) my operator name, address I have not provided this information to the KCC will be required to send this inform task, I acknowledge that I am being chart of the choosing the second option, submit payment of form and the associated Form C-1, Form CB-1.	pject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form his form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this phone number, fax, and email address. e surface owner(s). I acknowledge that, because I have not provided this information, the ation to the surface owner(s). To mitigate the additional cost of the KCC performing this reged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form. of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 Form T-1, or Form CP-1 will be returned. are true and correct to the best of my knowledge and belief.

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

JUN 1 8 2013 CONSERVATION DIVISION

WICHITA, KS

Surface Owners

API#: 15067202040000	Lease Name: _	C F PATTERSON				
Owner Name: WICKWAR, MARK & JOCELYN LIV TRS Address: 2268 N STUBBS RD						
City: ULYSSE	S State:	KS Zip : 67880				
Owner Name: Address:						
City:	State:	Zip:				
Owner Name: Address:						
City:	State:	Zip:				
•						
Owner Name: Address:						
City:	State:	Zip:				
Ourse Name						
Owner Name: Address:						
City:	State:	Zip:				

RECEIVED KANSAS CORPORATION COMMISSION

Well #: 2

JUN 1 8 2013