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:	ied with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:		
X Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 208391		
Gas Gathering System:	Lease Name: CLARA BELL		
Saftwater Disposal Well - Permit No.:	WZ.ec. 8 Twp. 31 R. 35W EXW		
Spot Location: feet from N / S Line	Legal Description of Lease:		
feet from E / W Line	T031S - R035W: SEC 008 E2 NE4, W2 NE4, E2 NW4, W2 NW4,		
Enhanced Recovery Project Permit No.:	SW4, SE4		
Entire Project: Yes No			
Number of Injection Wells***	County: Stevens		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE		
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. II Drill Pit, WO or Haul)	leet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover () D Drilling		
Past Operator's License No. 5208	Contact Person: LAURIE KILBRIDE		
	RECEIVED		
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	MINORG CONTOUTION COMMISSION		
P. O. BOX 4358, HOUSTON, TX 77210-4358	Dete: 05/31/2013 JUN 1 8 2013		
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole		
	CONSERVATION DIVISION WIGHTA, KO		
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	Date: 05/31/2013		
	Signature: Douglas C. Schultze		
Title: SR. OPERATIONS VICE PRESIDENT	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been		
	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 of the above named lease containing the surface pit		
the new operator and may continue to inject fluids as authorized by			
Permit No.: Recommended action:	permitted by No.:		
	Deter		
Date: Authorized Signature	Date:		
DISTRICT EPR	PRODUCTION		
Mail to: Past OperatorNew Opera			

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

Side Two

Must Be Filed For All Wells

Lease Name	CLARA BELL		• Location: 8 31 35W W1_				
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fo	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned		
2	15189208100000	2570FSL	1985F PL	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				
		FSUFNL	FEUFWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		***************************************		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL	•			
		FSL/FNL	FEL/FWL	market and a supplementary to the supplementary of the supplement of the supplementary of the			
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEUFWL				
		FSL/FNL	FEL/FWL	KANSAS	RECEIVED CORPORATION COMMISSION		
		FSL/FNL	FEL/FWL	·	JUN 1 8 2013		
		FSL/FNL	FEL/FWL		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 Locatio	
Name: EXXONMOBIL OIL CORPORATIO	Subject 15 to drive a sharehold and the state of the stat	W ² Csec. ⁸ Twp. ³¹ S. R. ³⁵ □Eas X West
Address 1: P. O. BOX 4358		vens
Address 2:		o: CLARA BELL Well #: 2
City: HOUSTON State: TX	Zip: 77210 ++4358	rm T-1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	TASIS DA	35W: SEC 008 E2 NE4, W2 NE4, E2 NW4, W2
Phone: (713 431- \859 Fax:	(<u>713</u> 431-1475 NW4, SW4,	
Email Address: adam.e.scott@exxonmol	oll.com	
Surface Owner Information:		
Name: See Attached	When filing	a Form T-1 involving multiple surface owners, attach an additional all of the information to the left for each surface owner. Surface
Address 1:	owner intorn	mation can be tound 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:	Zip:+	
Select one of the following:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which) the subject well is or will be located: 1) a co on with this form: 2) if the form being filed is a	2032), I have provided the following to the surface opy of the Form C-1, Form CB-1, Form T-1, or Form Form CB-1, the plat(s) required by this ess.
form; and 3) my operator name.	address, phone number, rax, and email addr	
form; and 3) my operator name. I have not provided this informat	ion to the curlace owner(s). Lacknowledge th	nat, because I have not provided this information, the tigate the additional cost of the KCC performing this
form; and 3) my operator name. I have not provided this informat KCC will be required to send this task, I acknowledge that I am be	ion to the surface owner(s). I acknowledge this information to the surface owner(s). To miseing charged a \$30.00 handling fee, payable t	nat, because I have not provided this information, the tigate the additional cost of the KCC performing this to the KCC, which is enclosed with this form.
form; and 3) my operator name. I have not provided this informat KCC will be required to send this task, I acknowledge that I am be if choosing the second option, submit p form and the associated Form C-1, Form	ion to the surface owner(s). I acknowledge this information to the surface owner(s). To minimize the standard of the \$30.00 handling fee, payable the savment of the \$30.00 handling fee with this fee.	nat, because I have not provided this information, the tigate the additional cost of the KCC performing this to the KCC, which is enclosed with this form. Form. If the fee is not received with this form, the KSONA-1 ned.
form; and 3) my operator name. I have not provided this informat KCC will be required to send this task, I acknowledge that I am be if choosing the second option, submit p form and the associated Form C-1, Form	ion to the surface owner(s). I acknowledge this information to the surface owner(s). To mit eing charged a \$30.00 handling fee, payable to ayment of the \$30.00 handling fee with this form CB-1, Form T-1, or Form CP-1 will be return	nat, because I have not provided this information, the tigate the additional cost of the KCC performing this to the KCC, which is enclosed with this form. Form. If the fee is not received with this form, the KSONA-1 ned.

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

Lease Name:

API#:	15189206100000	Lease Name: _	CLARA BELI		
Owr	ner Name: STUCKEY, JERR	RY E			
	Address: 2581 ROAD 24				
	City: MOSCOW	State:	KS Zip:	67952-5214	
Ow	ner Name: Address:				
	City:	State:	Zij	p:	
Ow	ner Name: Address:				
	City:	State	: Zip):	
Ow	ner Name:				
	Address: City:	State	: Ziş	p:	
Ow	rner Name:				
	Address:				
	City:	State	o: Zi j	p:	

CLARA BELL Well #: 2

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS