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 su | bmitted with this form. |
|--|--|
| Oil Lease: No. of Oil Wells | Effective Date of Transfer: 7/1/2013 |
| Gas Lease: No. of Gas Wells | |
| Gas Gathering System: | KS Dept of Revenue Lease No.: 220417 |
| | Lease Name: CREAMER |
| Spot Location: feet from N / S Line | |
| feet from E / W Line Enhanced Recovery Project Permit No.: | Legal Description of Lease: |
| Entire Project: Yes No | T034S - R037W: SEC 022 NE4 SEC 023 NE4, NW4, SE4 |
| Number of Injection Wells | |
| | County: Stevens |
| 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 |
| Time of Dia. | feet from E / W Line of Section |
| Type of Pit: Emergency Burn Settling | Haul-Off Workover Of Drilling |
| Past Operator's License No. 5208 | RECEIVED REPORT WANGS CONTINUED ON THE PROPERTY OF THE PROPERT |
| Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION | Contact Person: LAURIE KILBRIDE KANSAS CORPORATION COMMISSION |
| P. O. BOX 4358, HOUSTON, TX 77210-4358 | Phone: 713-431-1182 JUN 1 8 2013 |
| | Date: 05/31/2013 CONSERVATION DIVISION |
| Title: _RSO MANAGER/AGENT & ATTORNEY-IN-FACT | Signature: Andrew D. Pole WICHITA, KS |
| | |
| New Operator's License No | Contact Person: BRENDA WALLER |
| New Operator's Name & Address: XTO ENERGY INC. | Phone: 405-319-3259 |
| 210 PARK AVENUE, SUITE 2350 | THORE, |
| OKLAHOMA CITY, OK 73102 | Oil / Gas Purchaser: ONEOK FIELD SERVICES Date: 05/31/2013 |
| Title: SR. OPERATIONS VICE PRESIDENT | |
| | Signature: Douglas C. Schultze |
| Acknowledgment of Transfer: The above request for transfer of injection | authorization audoca de contra |
| noted, approved and duly recorded in the records of the Kansas Corporation | 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 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: |
| Authorized Signature | Authorized Signature |
| | PRODUCTION 10.17.13 UIC 10-17-13 |
| Mail to: Past Operator New Operator | Dr District |

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Must Be Filed For All Wells

| Lease Name: | CREAMER | | Location: 2 | 3 34 37W SE | |
|--|--|-----------------------------------|--|-------------|--|
| Well No. | API No. (YR DRLD/PRE '67) | Footage from (i.e. FSL = Feet) | Footage from Section Line (i.e. FSL = Feet from South Line) | | Well Status (PROD/TA'D/Abandoned |
| 14 INF | | 1250FSL | 1250FEL | GAS | ACTIVE |
| | | — FSL/FNL | FEL/FWL | | _ |
| | | | | | |
| | | | 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 | FEL/FWL | | |
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| | | FSL/FNL | FEL/FWL | | - |
| Marking in the Application of the Language of the Control of the C | | FSL/FNL | FEL/FWL | | AND |
| | | FSL/FNL | FEL/FWL _ | | |
| li Marii Mara a a dha wagana a a a a a a a a a a a a a a a a a | and the second of the second o | FSL/FNL | FEUFWL | | A Since Triangle of the College Control of the College |
| | | FSL/FNL | FEL/FWL | VANO | RECEIVED AS CORPORATION COMMISSION |
| | | FSL/FNL | FEL/FWL | MIO | |
| | | - FSL/FNL | FEL/FWL _ | - | JUN 1 8 2013 |
| | | FSL/FNL | FEL/FWL | | CONSERVATION DIVISION WICHITA, KS |
| | | FSL/FNL | FEL/FWL | | |

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 | | | x) XT-1 (Transfer) CP-1 (Plugging Application) |
|---|---|---|--|
| | ION | Well Location: | |
| Address 1: P. O. BOX 4358 | TON | <u>SE</u> se | c. 23 Twp.34 S. R. 37 Eas X West |
| Address 2: | | County: Stevens | |
| Address 2: | | Lease Name: CREAME | Well #: 1-4 INF |
| Crity: HOUSTON State: TX Contact Person: ADAM SCOTT | Zip: <u>77210 +</u> + <u>4358</u> | If filing a Form 1-1 for mu | ltiple wells on a lease, enter the legal description of |
| Phone: (713 431-1859 Fax | 713 431-1476 | THE POST OF LIGHT 18. | |
| Email Address: adam.e.scott@exxonmo | bbil.com | T034S - R037W: SEC 022 NE4 SEC 023 NE4, NW4, SE4 | |
| Surface Owner Information: | | | |
| Name: See Attached | - | Marin Blanco | |
| Address 1: | to the property of the second | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ | olving multiple surface owners, attach an additional rmation to the left for each surface owner. Surface |
| Address 2: | | STATE WINCH LIKERON COLD DIS | tound in the records of the register of deeds for the are property tax records of the county freasurer. |
| City: State: | 7in | and the field at the feet 6216 | ne property tax records of the county freasurer. |
| Select one of the following: | • | me to me to part, to me | ectrical lines. The locations shown on the plat B-1 plat, or a separate plat may be submitted. |
| I certify that, pursuant to the Kar owner(s) of the land upon which CP-1 that I am filing in connection form; and 3) my operator name, a | With this form: 2) if the form by | aled: I) a copy of the For | e provided the following to the surface in C-1, Form CB-1, Form T-1, or Form Form CB-1, the plat(s) required by this |
| I have not provided this information KCC will be required to send this task, I acknowledge that I am bein | | | have not provided this information, the tional cost of the KCC performing this ich is enclosed with this form. |
| choosing the second option, submit pay orm and the associated Form C-1, Form | yment of the \$30.00 handling fe CB-1, Form T-1, or Form CP-1 | e with this form. If the fee will be returned. | is not received with this form, the KSONA-1 |
| hereby certify that the statements made | herein are true and correct to th | ne best of my knowledge a | nd belief. |
| ate: 6/15/2013 Signature of Op | . | | Title: Regional Land Manager |
| API#:15189219170001 | KDOR #220417 | | RECEIVED KANSAS CORPORATION COMMISSION |

JUN 1 8 2013

Surface Owners

| API#: | 15189219170001 | Lease Name: _ | CREAMER | Well #:1-4 INF |
|-------|--------------------------|---------------|-------------|----------------------|
| | | | | |
| Own | er Name: LYNCH, JACKIE I | LIV TR TTEE | | |
| | Address: 1111 WILLOW SP | RINGS CT | | |
| | City: MCPHERSON | State: | KS Zip: 674 | 16 0-2131 |
| Own | er Name: | | | |
| | Address: | | | |
| | City: | State: | Zip: | |
| | er Name: Address: | | | |
| | City: | State: | Zip: | |
| | r Name: | | | |
| Α | ddress: | | | |
| | City: | State: | Zip: | |
| | · Name: ddress: | | | |
| | City: | State: | Zip: | |

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS