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,
MUST be submitted with this form.

Check Applicable Boxes:	keo win una iom.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 7/1/2013			
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 200876			
Gas Gathering System:	Lease Name: EARL D DAVIS			
Saltwater Disposal Well • Permit No.:				
Spot Location: feet from N / S Line	<u>SW Sec. 12 Twp, 31 R. 35W</u> EXW			
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T031S - R034W: SEC 005 NE4 T031S-035W: SEC 012 S2			
Entire Project: Yes No				
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):			
,	mjoolon Zoro(s).			
Surface Pit Permit No.:	feet from N / S Line of Section			
(API No. II Drill Pit, WO or Haul)	teet from E / W Line of Section			
Type of Pit:	Haul-Off Workover DP Drilling			
Past Operator's License No				
	Contact Person.			
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: _713-431-1182			
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date:05/31/2013			
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: <u>Andrew D. Cole</u>			
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 KCC WICHITA			
OKI ALIOMA OLTV OV 70400	07/04/0040			
OKLAHOMA CITY, OK 73102	IIIN 1.8 2013			
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze			
	RECEIVED			
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 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:			
0/07/12	0.2 .0 0.25.10			
DISTRICT EPR New Operator	PRODUCTION 9 · 3 o · 13 uic 9 - 30 - 13			
inem to Lot Operator New Operator	vi District			

Side Two

Must Be Filed For All Wells

		V		
KDOR Lease No.:	200876			

* Lease Name:	EARL D DAVIS		· · · · · · · · · · · · · · · · · · ·		
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
2	15189001610000/	1320FSL	3960FEL	GAS	ACTIVE
		FSL/FNL			
		FSUFNL	FEL/FWL		_
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEUFWL		
			FEL/FWL		
			FEL/FWL		
		501 501			
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		JUN 1 8 2013
		FSL/FNL	FEL/FWL		RECEIVED
	4 2 41 4 172				· /=~=! / ED

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	w	Vell Location:			
Name: EXXONMOBIL OIL CORPORATION			wp.31 S. R.35 Eas X West		
Address 1: P. O. BOX 4358	с	ounty: Stevens			
Address 2:	Le Le	ease Name: EARL D DAVIS	Well #; 2		
City: HOUSTON State: TX Zi	PE 77210 ++ 4358 //	filiog a Form 1-1 for multiple well	s on a lease, enter the legal description of		
Contact Person: ADAM SCOTT	tfi	te fease below:	·		
Phone: (713 431 1850 Fax: (7	713 431-1475	[031S - R034W: SEC 005 NE4 T0	31S-035W: SEC 012 S2		
Email Address: adam.e.scott@exxonmobil.co	om				
Surface Owner Information:					
Name: See Attached			ultiple surface owners, attach an additional		
Address 1:	sh	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:			rty tax records of the county treasurer.		
City: State: Zi	p:+				
Select one of the following: I certify that, pursuant to the Kansas owner(s) of the land upon which the CP-1 that I am filing in connection will form; and 3) my operator name, address I have not provided this information to KCC will be required to send this information cask, I acknowledge that I am being continuous.	subject well is or will be located th this form; 2) if the form being ess, phone number, fax, and em the surface owner(s). I acknow ormation to the surface owner(s	d: 1) a copy of the Form C-1, filed is a Form C-1 or Form Cl nail address. viedge that, because I have no To mitigate the additional c 	Form CB-1, Form T-1, or Form B-1, the plat(s) required by this of provided this information, the ost of the KCC performing this		
If choosing the second option, submit payme form and the associated Form C-1, Form CB			received with this form, the KSONA-1		
I hereby certify that the statements made her		, , , , , , , , , , , , , , , , , , ,	ef.		
Date: 6/15/2013 Signature of Operat	tor or Agent: <i>M. Michael Mci</i>	Nulty Title:	Regional Land Manager		

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

KCC WICHITA
JUN 18 2013
RECEIVED

Surface Owners

API#:	15189001610000	Lease Name: _	EARL	D DAVIS	Well #: _2
Own	er Name: ROONEY, JUDIT	HR			•
	Address: PO BOX 250				
	City: SATANTA	State:	KS	Zip: 67870-0250	
	ner Name:				
	Address:				
	City:	State:		Zip:	
	er Name: Address:				
	City:	State:		Zip:	
	er Name: Address:				
	City:	State:		Zip:	
	er Name: Address:				
	City:	State:		Zip:	