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:			
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.: 221634		
Gas Gathering System:	Lease Name: EVANS		
Saltwater Disposal Well - Permit No.:	NO Sec. 3 Twp. 27 R. 37W EXW		
Spot Location: feet from N / S Line	Legal Description of Lease:		
feet from E / W Line	T027S - R037W: SEC 003 All		
Enhanced Recovery Project Permit No.:	10213 - 100711. 020 000 7		
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.:	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover O Drilling		
	A MANUEL KILL DONNE		
Past Operator's License No	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		
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole		
New Operator's License No32864 \	Contact Person: BRENDA WALLER		
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259		
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES RECEIVED KANSAS CORPORATION COMMISSION		
OKLAHOMA CITY, OK 73102	Date: 05/31/2013 JUN 1 8 2013		
Title: SR. OPERATIONS VICE PRESIDENT	Signatura: Douglas C. Schuttze		
	CONSERVATION DIVISION WICHITA, KS		
Acknowledgment of Transfer: The above request for transfer of injection	••••		
	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the			
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		
DISTRICT EPR _/0/21//3	PRODUCTION 0CT 2 2 2013 UIC 10-22-13		
Mail to: Past OperatorNew Operat			

Side Two

Must Be Filed For All Wells

KDOR Lease Lease Name	51/4 NO		Location: 3	27 37W_NE	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)
13 INF	15067213930001	1237FNL	1231FEL	GAS	ACTIVE
		FSL/FNL			
			FEUFWL		
		FSL/FNL			
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL	and the second s	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.

Select the corresponding form being filed:	C-1 (Intent) CB-1 (Cathodic Protection Borencie	ILEGIT) (HOLDIE)
OPERATOR: License # 5208	Well Location:	
Name: EXXONMOBIL OIL CORPORATION		Sec. 3 Twp.27 S. R. 37 Eas X West
Address 1: P. O. BOX 4358	County: Grant	
Address 2:	. 53/441	S Well #: 1-3 INF
Cay: HOUSTON State: TX Zip:		r multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	the lease below: T027S - R037W: SE	C 003 All
Contact Person: ADAM SCOTT Phone: (713 431- 1854 Fax: (713	431-1475	000 All
Email Address: adam.e.scott@exxonmobil.com		
Surface Owner Information:		
Name: See Attached	When filing a Form	F1 involving multiple surface owners, attach an additional e information to the left for each surface owner. Surface
Address 1:	owner information c	an be tound in the records of the register of deeds for the
Address 2:	AND COMPANY OF THE PROPERTY OF	al estate property tax records of the county treasurer.
City: State: Zip: _	+	
Select one of the following:	along may be embraded and a series of	orm CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the st CP-1 that Lam filing in connection with	Surface Owner Notice Act (House Bill 2032), ubject well is or will be located: 1) a copy of ti this form; 2) if the form being filed is a Form C ss, phone number, fax, and email address.	ie Form C-1. Form CB-1, Form 1-1, Griden
VCC will be required to cond this infor	the surface owner(s). I acknowledge that, bec mation to the surface owner(s). To mitigate the arged a \$30.00 handling fee, payable to the K	le additional cost of the MCC benchming and
If choosing the second option, submit paymen form and the associated Form C-1, Form CB-1	nt of the \$30.00 handling fee with this form. If I, Form T-1, or Form CP-1 will be returned.	the fee is not received with this form, the KSONA-1
I hereby certify that the statements made here	in are true and correct to the best of my know	edge and belief.
Date: 6/15/2013 Signature of Operato	or or Agent:	Title: Regional Land Manager
API # :15067213930001	KDOR #221634	RECEIVED KANSAS CORPORATION COMMISSION

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

JUN 1 8 2013

Surface Owners

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API#: 15067213930001	Lease Name:	EVANS	Well #: 1-3 INF
Owner Name: STEWART VIII PA			
City: PUEBLO	State:	CO Zip : 81006	
Owner Name: Address: City:	State:	Zip:	
Owner Name: Address: City:	State:	Zip:	
Owner Name: Address: City:	State:	Zip:	
Owner Name: Address: City:	State:	Zip:	

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS