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: 7/1/2013 Effective Date of Transfer: Oil Lease: No. of Oil Wells _ 207331 KS Dept of Revenue Lease No.: _ Gas Lease: No. of Gas Wells .. Lease Name: FRANCIS M GARVER Gas Gathering System:.. Saltwater Disposal Well - Permit No.: ___ SW Sec. 9 Twp. 31 R. 35W FE XW Spot Location: ______ feet from N / S Line Legal Description of Lease: __ feet from \square E / \square W Line T031S - R035W: SEC 009 SW4, E2, NW4 Enhanced Recovery Project Permit No.: ___ Entire Project: Yes No Number of Injection Wells County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE **COUNCIL GROVE** Production Zone(s): ** Side Two Must Be Completed. Injection Zone(s): test from N / S Line of Section Surface Pit Permit No.: _ (API No. If Drill Pit, WO or Haul) feet from E / W Line of Section Drilling Workover_) Settling Haul-Off ☐ Burn Type of Pit: **Emergency** LAURIE KILBRIDE Contact Person: . Past Operator's License No. 5208 Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 RECEIVED KANSAS CORPORATION COMMISSION 05/31/2013 P. O. BOX 4358, HOUSTON, TX 77210-4358 Date: JUN 1 8 2013 **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: <u>Andrew D. Cole</u> CONSERVATION DIVISION WICHITA, KS **BRENDA WALLER** Contact Person: __ New Operator's License No. 32864 New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: _ Oil / Gas Purchaser: WGP-KHC LLC 210 PARK AVENUE, SUITE 2350 05/31/2013 OKLAHOMA CITY, OK 73102 Signature: <u>Douglas C. Schultze</u> Title: SR. OPERATIONS VICE PRESIDENT Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #___ 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 of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by permitted by No.: ___ _____ . Recommended action: _ Date: Authorized Signature Authorized Signature PRODUCTION ___ DISTRICT -**New Operator**

Mail to: Past Operator_

Side Two

Must Be Filed For All Wells

ease Name	FRANCIS M GARVER	* Location; 9 31 35WSW				
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	15189205360000 /	2310FSL	2970FEL	GAS	ACTIVE	
<u>-</u> -						
		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			
		FSL/FNL	FEL/FWL			
		col still	FEL/FWL			
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		FSL/FNL	FEL/FWL			
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		FSL/FNI	FEL/FWL			
		F\$L/FNI	FEL/FWL		RECEIVED S CORPORATION COMMISSION	
		FSL/FNI	FEL/FWL	· ·		
		FSL/FN	FEL/FWL	William Willia	JUN 1 8 2013	
		FSL/FN	LFEL/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 Location: SW_Sec.9 Twp.31 S. R.36Eas[X]West
Name: EXXONMOBIL OIL CORPORATION	According to the Control of the Cont
Address 1: P. O. BOX 4358	
Address 2:	
City: HOUSTON State: TX Zip: 77210 ++	4358 If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Contact Person: ADAM SCOTT	T031S - R035W: SEC 009 SW4, E2, NW4
Phone: { 713 431-1859 Fax: { 713 431-1475	
Email Address: <u>adam.e.scott@exxonmobil.com</u>	
Surface Owner Information:	
Name: See Attached	When filing a Form 1.1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface
Address 1:	awner information can be found 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:	e entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
annually of the land man which the cubiect Well	er Notice Act (House Bill 2032), I have provided the following to the surface or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this niber, fax, and email address.
VCC will be required to send this information to it	wner(s). I acknowledge that, because I have not provided this information, the surface owner(s). To mitigate the additional cost of the KCC performing this 00 handling fee, payable to the KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30 form and the associated Form C-1, Form CB-1, Form T-1,	00 handling fee with this form. If the fee is not received with this form, the KSONA-1 r Form CP-1 will be returned.
I hereby certify that the statements made herein are true a	id correct to the best of my knowledge and belief.
Date: 6/15/2013 Signature of Operator or Agent:	M. Michael McNulty Title: Regional Land Manager
API # :15189205360000 KI	OR #207331 RECEIVED KANSAS CORPORATION COMMISSIO

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

JUN 1 8 2013

Surface Owners

API#:	15189205360000	Lease Name: _	FRANCIS	S M GARVER	Well #: _2
_					
	er Name: LAMBERT, VION Address: 1031 INVERNES				
	City: WICHITA	State:	KS :	Zip : 67218-3611	
	ner Name: Address:				
	City:	State:		Zip:	
	ner Name: Address:				
	City:	State	1	Zip:	
	ner Name: Address:				
	City:	State	:	Zip:	
	ner Name: Address:				
	City:	State	:	Zip:	

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013