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

10-24-13

District

REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Hotification Act, MUST be submitted with this form. Check Applicable Boxes: Oil Lease: No. of Oil Wells Effective Date of Transfer-Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 221574 Gas Gathering System:_ Lease Name: G M HAMPTON Saltwater Disposal Well - Permit No.: ___ SW Sec. 3 Twp. 28 R. Spot Location: ______ feet from N / N S Line Legal Description of Lease: _____feet from F / W Line T028S - R036W: SEC 003 N2, S2 Enhanced Recovery Project Permit No.: 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 (API No. If Drill Pit, WO or Haul) feet from E / W Line of Section Type of Pit: Emergency Bum Settling Haul-Off **Workover**∕ Drilling Contact Person: LAURIE KILBRIDE Past Operator's License No. __5208 Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 Date: **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: <u>Andrew D. Cole</u> RECEIVED KANSAS CORPORATION COMMISSION IUN 1 8 2013 New Operator's License No. 32864 **BRENDA WALLER** Contact Person: . New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 CONSERVATION DIVISION 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: WGP-KHC LLC OKLAHOMA CITY, OK 73102 05/31/2013 Date: Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultze Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #___ has been noted, approved and duty 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.: ___ **Authorized Signature** Authorized Signature

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

New Operator

PRODUCTION _

DISTRICT -

Mail to: Past Operator_

Side Tex

Must Be Filed For All Wells

Lease Name	G M HAMPTON		Location: 3	28 36WSW		
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Section Line rom South Line)	Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandone	
3	15067213810001	1250FSL	1250FWL	GAS	ACTIVE	
					- ···	
	****	FSL/FNL	FEL/FWL			
	-	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	***		
	***	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	194		
		FSL/FNL	FEUFWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	4	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	mit vir virialitiet kirjal (1994) en ver dalle kalade tale (1 994) et kolade (1994) et kalade (1994) et kala	The Continues of the Co	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL .		RECEIVED	
			FEL/FWL	KANSAS	CORPORATION COMMISSION	
			FEL/FWL		JUN 1 8 2013	

Trooperate state may be attached a recessary

^{*} 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 K90NA-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.

5208							
OPERATOR: License # 5208 Name: EXXONMOBIL OIL CORPORATION			Well Location:SW Sec. 3 Twp.28 S. R. 36 EastX West				
Address 1: P. O. BOX 4358			Sec IWp.25 S. R. 50 East West				
Address 2:		<u> </u>	MPTON Well #: 3				
City: HOUSTON State:		4259	multiple wells on a lease, enter the legal description of				
Contact Person: ADAM SCOTT		the lease below:					
Phone: (713 #31- 1959	Fax: { 713 431-1475	T028S - R036W: SEC	003 N2, S2				
Email Address:adam.e.scott@exxc	nmobil.com						
Surface Owner Information:							
Name: See Attached	Note the second		involving multiple surface owners, attach an additional				
Address 1:	ddress 1:		information to the left for each surface owner. Surface be found in the records of the register of deeds for the				
Address 2:	mangamenter in and an amendmenters that a first an also defined assessed in		estate property tax records of the county treasurer.				
City: State: _	Zip:+						
Select one of the following:	es. The locations may t	e enered on the rorm C-1 plat, rom	π CB-1 plat, or a separate plat may be submitted.				
owner(s) of the land upon w CP-1 that I am filing in conn	hich the subject well is ection with this form; 2)	s or will be located: 1) a copy of the t	nave provided the following to the surface Form C-1, Form CB-1, Form T-1, or Form or Form CB-1, the plat(s) required by this				
KCC will be required to sen	d this information to the		se I have not provided this information, the additional cost of the KCC performing this , which is enclosed with this form.				
If choosing the second option, subn form and the associated Form C-1,			e fee is not received with this form, the KSONA-1				
I hereby certify that the statements i	made herein are true ar	nd correct to the best of my knowledg	ge and belief.				
Date: 6/15/2013 Signature	e of Operator or Agent:	M. Michael McNulty	Title: Regional Land Manager				
API # :15067213810001	KDG	OR #221574	RECEIVED KANSAS CORPORATION COMMISSIO				

02

JUN 1 8 2013

Surface Owners

API#: 15067213810001 Lease Name:

API#:_	15067213810001	_ Lease Name: _	G M	HAMPTO	DN	 Well #: _3	
Ourn	er Name: HAMPTON, LO	Ne k touet					
	Address: ATTN: JEANIN						
	City: OVERLAND PA	ARK State:	KS	Zip:	66211		
	er Name: WILDERSON,						
•	Address: 509 NE APPLE	WOOD					
	City: LEES SUMMIT	T State:	МО	Zip:	64063-2412		
	er Name: Address:						
	City:	State:		Zip:			
	er Name: Address:						
,							
	City:	State:		Zip:			
	or Name: Address:						
•		_					
	City:	State:		Zip:			

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS