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# 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,
MIST he submitted with this form

Check Applicable Boxes: MUST be sub	omitted with this form.
Oll Lease: No. of Oil Wells	Effective Date of Transfer: 7/1/2013  KS Dept of Revenue Lesse No. 201457
Surface Pit Permit No.:  (API No. II Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling  Past Operator's License No. 5208 /  Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION P. O. BOX 4358, HOUSTON, TX 77210-4358  Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	leet from N / S Line of Section  leet from E / W Line of Section  Haul-Off Workove D Drilling  Contact Person: LAURIE KILBRIDE  Phone: 713-431-1182  Date: 05/31/2013  Signature: Audrew D. Cole
New Operator's License No. 32864  New Operator's Name & Address: XTO ENERGY INC.  210 PARK AVENUE, SUITE 2350  OKLAHOMA CITY, OK 73102  Title: SR. OPERATIONS VICE PRESIDENT  Acknowledgment of Transfer: The above request for transfer of injection noted, approved and dufy recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Contact Person:BRENDA WALLER  Phone:405-319-3259  Oil / Gas Purchaser:ONEOK FIELD SERVICESKCC WICHITA  Date:05/31/2013  Signature:Douglas
is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.:  Recommended action:  Date:  Authorized Signature  DISTRICT  EPR / D / 4 / 3  Mail to: Past Operator  New Operator	is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.:  Date:

#### Must Be Filed For All Wells

Lease Name:	GROTHE	Location: 24 33 35W NW				
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned	
A1		2970FSL 2970FEL		GAS		
		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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	. 245/4	FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL		KCC WICHI	
		FSL/FNL	FEL/FWL		JUN 1 8 2013	

#### A separate sheet may be attached if necessary

\_\_\_\_\_F\$L/FNL \_\_\_\_\_FEL/FWL \_\_\_\_\_

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<sup>\*</sup> 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:		
Name: EXXONMOBIL OIL CORPORAT			Twp.33 S. R.35 Eas X West	
Address 1: P. O. BOX 4358		County: Stevens		
Address 2:		•	Well #: A1	
City: HOUSTON State: TX	Zip: 77210 + 4358	If filing a Form T-1 for multiple	wells on a lease, enter the legal description of	
Contact Person: ADAM SCOTT		the lease below:	,	
Phone: ( 713 431-} 774 Fax	: ( <u>713 431-1475</u>	10335 - R035W; SEC 024 NW	/4, NE4, E2 SE4, W2 SE4, SW4	
Email Address: adam.e.scott@exxonme	obil.com			
Surface Owner Information:				
Name: See Attached		When filing a Form T-1 involving	g multiple surface owners, attach an additional	
Address 1:		sheet listing all of the information to the left for each surface owner. Surfac owner information can be found in the records of the register of deeds for th		
Address 2:		county, and in the real estate pr	roperty tax records of the county treasurer.	
State:	Zip:+			
owner(s) of the land upon which CP-1 that I am filing in connection	ansas Surface Owner Notice Act (h h the subject well is or will be locate on with this form; 2) if the form being address, phone number, fax, and e	ed: 1) a copy of the Form C g filed is a Form C-1 or Form	-1. Form CB-1. Form T-1, or Form	
KCC will be required to send thi	ion to the surface owner(s). I ackno is information to the surface owner( sing charged a \$30.00 handling fee,	(s). To mitigate the addition.	al cost of the KCC performing this	
f choosing the second option, submit poorm and the associated Form C-1, Form	ayment of the \$30.00 handling fee in CB-1, Form T-1, or Form CP-1 will	with this form. If the fee is r I be returned.	not received with this form, the KSONA-1	
hereby certify that the statements mad	e herein are true and correct to the	best of my knowledge and b	pelief.	
Date: 6/15/2013 Signature of C	Operator or Agent:	CNulty T	ille: Regional Land Manager	

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

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### **Surface Owners**

API#:_	15189003470000	Lease Name: _	GROTHE		Well #: _A1
	er Name: HARPER, ALVEN Address: 1299 ROAD 26	NA DARLENE			
	City: HUGOTON	State:	KS Zip:	67951-5157	
	er Name: Address: City:	State:	<b>Z</b> ip:		
		State.	Zip:		
	er Name: Address:				
	City:	State:	Zip:		
	r Name: ddress:				
	City:	State:	Zip:		
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	City:	State:	Zip:		