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: MUST be subn	itted with this form.
Check Applicable Boxes: Oil Lease: No. of Oil Wells	Effective Date of Transfer: 7/1/2013 KS Dept of Revenue Lease No.: 208266 Lease Name: HOLT SW Sec. 21 Twp. 32 R. 37W E X W Legal Description of Lease:
Enhanced Recovery Project Permit No.: Entire Project:Yes No Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE ** Side Two Must Be Completed.	T032S - R037W: SEC 020 NE4 SEC 021 N2, SW4 County: Stevens Production Zone(s): COUNCIL GROVE Injection Zone(s):
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	leet from N / S Line of Section leet from E / W Line of Section Haul-Off Workover P Drilling
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	Contact Person: LAURIE KILBRIDE Phone: _713-431-1182 RECEIVED Phone: _05/31/2013 Date:05/31/2013 Signature:Andrew D. Cole CONSERVATION DIVISION WICHTA KS
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	Contact Person: BRENDA WALLER Phone: 405-319-3259 Oil / Gas Purchaser: ONEOK FIELD SERVICES Date: 05/31/2013 Signature: Douglas C. Schultze
	authorization, surface pit permit # has been Commission. This acknowledgment of transfer pertains to Kansas Corporation above injection well(s) or pit permit.
is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action:	the new operator of the above named lease containing the surface pit permitted by No.:
Date:	PRODUCTION OCT 3 0 2013 UIC 10-30-13

Side Two

Must Be Filed For All Wells

Lease Name: HOLT			Location: 2	* Location: 21 32 37WSW			
Well No.	API No. (YR DRLD/PRE '67)	Foolage from (i.e. FSL = Feet fr	Section Line	Type of Well (Oll/Gas/INJ/WSW) (Oll/Gas/INJ/WSW)			
12	15189202860000	12#0FSL	20 W 1250FEL	GAS	ACTIVE		
	-						
	-	FSL/FNL	FEL/FWL	· ·			
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
****		FSL/FNL	FEL/FWL				
	•	FSL/FNL	FEUFWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEUFWL				
		FSL/FNL	FEL/FWL				
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		FSL/FNL					
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			FEL/FWL				
inter executive to survivine to reserve the se	Control Committee Control Cont		» a reconstruction of PEL/FWL	. If the description with the horizontal section of the section	Profesional reference of the control		
		FSL/FNL	FEL/FWL		RECEIVED		
		FSL/FNL	FEL/FWL	K	ANSAS CORPORATION COMMISSION		
	-	FSL/FNL	FEL/FWL		JUN 1 8 2013		
784		FSL/FNL	FEL/FWL		CONSERVATION DIVISION WICHITA, KS		
		FSL/FNL	FEL/FWL				

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 of 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	Mallinander
Name: EXXONMOBIL OIL CORPORATION	Well Location:
Address 1: P. O. BOX 4358	County: Stevens
Address 2:	-
eay: HOUSTON State: TX Zip: 77210 ++ 4358	
Contact Person: ADAM SCOTT	the lease below:
Phone: (713 431-1899 Fax: (713 431-1475	T032S - R037W: SEC 020 NE4 SEC 021 N2, SW4
mail Address: adam.e.scott@exxonmobil.com	<u> </u>
Surface Owner Information:	
Name: See Attached	
Address 1:	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:	a de maria de la compansión de la compan
State: Tip:+ If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cithe KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat
City: State: Zip:+ If this form is being submitted with a Form C-1 (Intent) or CB-1 (C the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be enter	athodic Protection Borehole Intent), you must supply the surface owners and
State: State: Zip:+ If this form is being submitted with a Form C-1 (Intent) or CB-1 (C the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be enter Select one of the following: X I certify that, pursuant to the Kansas Surface Owner Notiowner(s) of the land upon which the subject well is or will	cathodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Ice Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form porm being filed is a Form C-1 or Form CB-1, the plat(s) required by this
State:	cathodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Ice Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form porm being filed is a Form C-1 or Form CB-1, the plat(s) required by this
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If this form is being submitted with a Form C-1 (Intent) or CB-1 (Citie KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be enter Select one of the following: Certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the following; and 3) my operator name, address, phone number, form; and the provided this information to the surface owner(s) KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hands.	Cathodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Idea Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filled is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address. In acknowledge that, because I have not provided this information, the see owner(s). To mitigate the additional cost of the KCC performing this dling fee, payable to the KCC, which is enclosed with this form, the KSONA-1 in CP-1 will be returned.

API # :15189202860000 KDOR #208266

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

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

Surface Owners

API#:_	1518920	2860000	Lease Name: _	HOLT		
Own	er Name:	GILLESPIE, SETH	1			
		PO BOX 337				
	City	HUGOTON	Stata	VC.	7: .	67054 0007
	Oity.	110001014	State.	KS	∠ıp:	67951-0337
Own	er Name:					
	Address:					
	City:		State:		7 !	
	Oity.		State.		Zip:	
Own	er Name:					
	Address:					
	City:		State:		Zip:	
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	City:		State:		Zip:	

RECEIVED KANSAS CORPORATION COMMISSION

_____ Well #: _1-2

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS