Authorized Signature

District

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: Oil Lease: No. of Oil Wells Effective Date of Transfer: 7/1/2013 Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: __ Gas Gathering System:_ Lease Name: JONES Saltwater Disposal Well - Permit No.: NE Sec. 3 Two. 33 R. 36W Spot Location: ______ feet from N / S Line Legal Description of Lease: _____feet from E / W Line Enhanced Recovery Project Permit No.: __ T033S - R036W: SEC 003 S2 NW4, SW4, SE4, S2 NE4 (NENE) (NWNE) (NENW) (NWNW) Entire Project: Yes No Number of Injection Wells County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): CHASE ** Side Two Must Be Completed. Injection Zone(s):_ Surface Pit Permit No.: _ leet from N / S Line of Section (API No. If Drill Pit. WO or Haul) E / W Line of Section Type of Pit: Emergency Bum Settling Haul-Off Workover (?) Drilling Past Operator's License No. __5208 **LAURIE KILBRIDE** Contact Person: Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: _713-431-1182 P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: Andrew D. Cole New Operator's License No. 32864 **BRENDA WALLER** Contact Person: . New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: ONEOK FIELD SERVICES RECEIVED KANSAS CORPORATION COMMISSION OKLAHOMA CITY, OK 73102 05/31/2013 Title: SR. OPERATIONS VICE PRESIDENT Signature: <u>Douglas C. Schultze</u> CONSERVATION DIVISION Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #___ WICHTRIPRS 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 and may continue to inject Iluids as authorized by the new operator of the above named lease containing the surface pit ______ . Recommended action: permitted by No.: ____

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

New Operator

Authorized Signature

DISTRICT -

Mail to: Past Operator_

Side Two

Lease Name: JONES		- Location: 3 33 36 ₩ N €					
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		
14 INF	15189218370001	1460F\$L	1250FEL	GAS	ACTIVE		
		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	FEL/FWL				
		FSL/FNL	FEUFWL				
		FSL/FNL	FEL/FWL				
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Computation of the second specific spec	B Constitution and analysis ana	FSL/FNL		From - recommendation and control and cont			
		FSL/FNL			and Administration and a state of the state		
- Codel (1994 - Selectorismont)		FSL/FNL	FEL/FWL	*OpenSAG 20-407 year ************************************			
		_ FSL/FNL	FEL/FWL	**Objects 460: 2014-400 roots immercial/articles/approximate or year. In configurational and in color roots	Brad in the Profession and afficient and the profession of the Control of the Con		
			FEL/FWL	-	RECEIVED		

_FSL/FNL __

____FSL/FNL _

_ FSL/FNL ______ FEL/FWL _

_FEL/FWL

FEL/FWL _

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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. It 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
http://doi.org/10.000/10.00000/10.0000/10.00000/10.00000/10.0000/10.00000/10.0000/10.0000/10.0000/10.0000

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 Borehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License #5208	Well Location:		
Name: EXXONMOBIL OIL CORPORATION			
Address 1:P. O. BOX 4358	County: Stevens		
Address 2:	Lease Name: JONES Well #: 1-4 INF		
City: HOUSTON State: TX Zip: 77210 ++ 4358			
Contact Person: ADAM SCOTT	If filing a Form 1-1 for multiple wells on a lease, enter the legal description of the lease below: T033S - R036W: SEC 003 S2 NW4, SW4, SE4, S2 NE4 (NENE)		
Phone: (713 431- 1359 Fax: (713 431-1475			
Email Address: adam.e.scott@exxonmobil.com	(NWNE) (NENW) (NWNW)		
Surface Owner Information:			
Name: See Attached	When thing a Form 1-1 involving multiple surface owners, attach an additional		
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:	county, and in the real estate property tax records of the county treasurer.		
City: State: Zip:+			
form; and 3) my operator name, address, phone number, fax, an	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this id email address.		
KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling to	[IBI(S)]. IO MITIGATE the additional cost of the KCC performing this		
lf choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
hereby certify that the statements made herein are true and correct to t	he best of my knowledge and belief.		
Date. 6/15/2013 Signature of Operator or Agent: W. Michael	McNulty Regional Land Manager		
API # :15189218370001 KDOR #219962	OFORIUM		
	RECEIVED KANSAS CORPORATION COMMISSION		

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202 JUN 1 8 2013

Surface Owners

Owner Name: YOUNG, WALTER D TR Address: PO BOX 567 City: HUGOTON State: KS Zip: 67951-0567 Owner Name: Address: City: State: Zip: Owner Name: Address: City: State: Zip:	API#:_	15189218370001	Lease Name: _	JONES		Well #: 1-4 INF
Address: PO BOX 567 City: HUGOTON State: KS Zip: 67951-0567 Owner Name: Address: City: State: Zip: Owner Name: Address: City: State: Zip:						
City: HUGOTON State: KS Zip: 67951-0567 Owner Name: Address: City: State: Zip: Owner Name: Address: City: State: Zip:	Own	er Name: YOUNG, WALTER	RDTR			
Owner Name: Address: City: State: Zip: Owner Name: Address: City: State: Zip:	4	Address: PO BOX 567				
Address: City: State: Zip: Owner Name: Address: City: State: Zip: Owner Name: Address:		City: HUGOTON	State:	KS Zip:	67951-0567	
City: State: Zip: Owner Name: Address: City: State: Zip: Owner Name: Address:						
Owner Name: Address: City: State: Zip: Owner Name: Address:	ı	Address:				
Address: City: State: Zip: Owner Name: Address:		City:	State:	Zip:		
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City: State: Zip: Owner Name: Address:						
Owner Name: Address:	•	Address:				
Address:		City:	State:	Zip:		
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City: State: Zip:						
		City:	State:	Zip:		
Owner Name: Address:						
City: State: Zip:		City:	State:	Zip:		

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