KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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 Compilance 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: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: Gas Gathering System: Lease Name: LEE Saltwater Disposal Well - Permit No.: 26 ___feet from N/NS Line Legal Description of Lease: _____feet from ___ E / __ W Line T026S - R036W: SEC 019 All Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells. County: Kearny Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s): ** 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) feet from E / W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover 10 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 Date: 05/31/2013 RECEIVED KANSAS CORPORATION COMMISSION **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: Andrew D. Cole CONSERVATION DIVISION **BRENDA WALLER** New Operator's License No. . Contact Person-WICHITA: KS New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: ONEOK FIELD SERVICES **OKLAHOMA CITY, OK 73102** 05/31/2013 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 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 fluids as authorized by the new operator of the above named lease containing the surface pit _____ . Recommended action: permitted by No.: _ Date: Authorized Signature Authorized Signature DISTRICT **PRODUCTION**

District

New Operator

Mail to: Past Operator_

Side Two

Must Be Filed For All Wells

Lease Name	LEE		- Location: 19 26 36WNE					
Well No.	API No. (YR DRLD/PRE '67)		Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)			
35 INF	15093214340000 /	1250FNL	1320FEL	GAS	ACTIVE			
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL		*			
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
	-	FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL		-			
	<u> </u>	FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL	-				
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSUFNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
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			FEL/FWL					
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		FSL/FNL	FEL/FWL					
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	-	FSL/FNL	FEL/FWL					
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			FEL/FWL					
·		FSUFNL	FEL/FWL					
		FSL/FNL	FEL/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

May 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.

	2-1 (listent)CB-1 (Carr	odic Protection Borehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License # 5208		Well Location:			
Name: EXXONMOBIL OIL CORPORATION		NE_Sec. 19 Twp.26 S. R. 36Eas X West			
Artricess 1: P. O. BOX 4358		County: Kearny			
Address 2:		Lease Name: LEE Well #: 35 INF			
City: HOUSTON State: TX Zip: 7	77210 ++ 4358	If filing a Form 1-1 for moltiple wells on a lease, enter the legal description of the lease below:			
Contact Person: ADAM SCOTT	Miller Machine 16 S S S S S S S S S S S S S S S S S S				
Phone: { 713 431-1854 Fax: { 713 43	31-1475	T026S - R036W: SEC 019 All			
Email Address: adam.e.scott@exxonmobil.com					
Surface Owner Information:					
Name: See Attached		When filing 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:	+				
Select one of the following:	rs may be entered on thi	e Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
owner(s) of the land upon which the subject CP-1 that I am filing in connection with this form; and 3) my operator name, address, pl	ct well is or will be locat form; 2) if the form bein hone number, fax, and e	House Bill 2032), I have provided the following to the surface ed: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form g filed is a Form C-1 or Form CB-1, the plat(s) required by this small address.			
KCC will be required to send this information	on to the surface owner	(s). To mitigate the additional cost of the KCC performing this payable to the KCC, which is enclosed with this form.			
If choosing the second option, submit payment of to form and the associated Form C-1, Form CB-1, For	the \$30.00 handling fee rm T-1, or Form CP-1 wi	with this form. If the fee is not received with this form, the KSONA-1 If be returned.			
I hereby certify that the statements made herein are	e true and correct to the	best of my knowledge and belief.			
Date. 6/15/2013 Signature of Operator or A	agent: M. Michael M	Multuy Title: Regional Land Manager			
API # :15093214340000	KDOR #220416	RECEIVED KANSAS CORPORATION COMMISSION			

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

JUN 1 8 2013

Surface Owners

API#:	15093214340000	Lease Name: _	LEE			Well #: 3-5 INF		
						, , , , , , , , , , , , , , , , , , , ,		
Owner Name: BERLIER RANCH LLC ETAL								
	Address: 241 ROAD T	II LLC ETAL						
•	Addioso. 241 NOAD 1							
	City: LAKIN	State:	KS	Zip: 6	37860			
Own	er Name:							
	Address:							
	City:	State:		Zip:				
Our	er Name:							
	er Name: Address:							
	City:	State:		Zip:				
Own	er Name:							
	Address:							
	City:	Stata.						
	City.	State:		Zip:				
	er Name:							
,	Address:							
	City:	State:		Zip:				

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS