### 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,

Check Applicable Boxes: MUST be submit	ted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 7/1/2013			
X Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 203245			
Gas Gathering System:	Lease Name: _M L REYLDS			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T031S - R035W: SEC 022 All			
Entire Project: Yes No				
Number of Injection Wells***	County: Stevens			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE Injection Zone(s):			
** Side Two Must Be Completed.				
	mjectori Ecrotof.			
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 DR Drilling			
5208/	Contract Danner LAURIE KILBRIDE			
Past Operator's License No	Contact Person:			
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182  Date: 05/31/2013			
P. O. BOX 4358, HOUSTON, TX 77210-4358				
Title:RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature:Andrew D. Cole			
New Operator's License No. 32864	Contact Person: BRENDA WALLER			
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259			
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: WGP-KHC LLC KCC WICHITA			
	05/04/0042			
OKLAHOMA CITY, OK 73102				
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u> RECEIVED			
Acknowledgment of Transfer: The above request for transfer of injection				
•	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 of the above named lease containing the surface pit			
the new operator and may continue to inject fluids as authorized by				
Permit No.: Recommended action:	permitted by No.:			
Date:	Date:			
1 /2/47//3	PRODUCTION 9 · 30 · 43 UIC 9-30-13			
DISTRICT EPR 9/2//S Mail to: Past Operator New Operat				
I man or a series				

#### Side Time

### Must Be Filed For All Wells

* Lease Name: M L REYLDS			Location: 2	2 31 35 WSE		
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	
B1	15189001750001	2310FSL	2310FEL	GAS	ACTIVE	
	_					
- Water		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			
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	<del>-</del>	FSL/FNL	FEL/FWL			
	-	FSL/FNL	FEL/FWL		VCC MICHITA	
		FSL/FNL	FEL/FWL		KCC WICHITA	
<del>The factors as the region of the state of t</del>	***************************************	FSL/FNL	FELFWL	er en	JUN 1 8 2013	
		FSL/FNL	FEL/FWL		RECEIVED	

A separate sheet may be attached if necessary

<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.

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	(F = 22 = 24 = 25 [7]
Address 1: P. O. BOX 4358	
Address 2:	Lease Name; M L REYLDS Well #: B1
City: HOUSTON State: TX Zip: 77210 ++ 4	358 Ut filing a Form 1-1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	the lease below:
Phone: ( 713 431- Fax: ( 713 431-1475	T031S - R035W: SEC 022 All
Email Address: adam.e.scott@exxonmobil.com	
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:	and the second state and the s
City: State: Zip:+	<b></b>
owner(s) of the land upon which the subject well is of CP-1 that I am filing in connection with this form; 2) if form; and 3) my operator name, address, phone number I have not provided this information to the surface own KCC will be required to send this information to the stask, I acknowledge that I am being charged a \$30.00	er(s). I acknowledge that, because I have not provided this information, the urface owner(s). To mitigate the additional cost of the KCC performing this handling fee, payable to the KCC, which is enclosed with this form.  thandling fee with this form. If the fee is not received with this form, the KSONA-1
I hereby certify that the statements made herein are true and	
Date: 6/15/2013 Signature of Operator or Agent: 7/	I. Michael McNulty Tille: Regional Land Manager
API#:15189001750001 KDOR	#203245 KCC WICHITA
	11111 4 0 0000

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

JUN 18 2013 RECEIVED

### **Surface Owners**

API#:	15189001750001	Lease Name: _	MLF	EYLDS		Well #: <u>B1</u>	_
Own	ner Name: WHITE, BRIAN K	& TINA L					
	Address: 1931 ROAD V						
	City: MOSCOW	State:	KS	Zip:	67952-5234		
	ner Name: ROLAND, MABLE Address: 206 RANSOM						
	City: MOSCOW	State:	KS	Zip:	67952-5271		
	ner Name: Address:						
	City:	State:		Zip:			
	ner Name: Address:						
	City:	State:		Zip:			
	er Name:						
	Address: City:	State:		Zip:			

JUN 18 2013
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