### 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:	7/1/2013
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 207348
Gas Gathering System:	Lease Name: MARY HORNER
Saltwater Disposal Well - Permit No.:	<u>sw_sec. 6 Twp. 28 R. 36W</u> EXW
Spot Location: feet from N / S Line	Legal Description of Lesse:
feet from E / W Line	T028S - R036W: SEC 006 S2 NE4, SE4, E2 SW4, SE4 NW4
Enhanced Recovery Project Permit No.:	(NENE) (NWNE) (NENW) (NWNW) (SWNW) (NWSW) (SWSW)
Entire Project: Yes No	
Number of Injection Wells **	County: Grant
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:(API No. If Drill Pit, WO or Haul)	feet from N / S Line of Section E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover OP Drilling
Past Operator's License No. 5208	Contact Person: LAURIE KILBRIDE
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: _713-431-1182
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 KANSAS CORPORATION COMMISSIO
Title. RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Colc JUN 1 8 2013
Title:	Orginatoro
	CONSERVATION DIVISION WICHITA, KS
New Operator's License No	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
OKLAHOMA CITY, OK 73102	Date: 05/31/2013
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u>
Acknowledgment of Transfer: The above request for transfer of injection and approved and duly recorded in the records of the Kansas Corporation	authorization, surface pit permit #has been Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	
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
Permit No.: Recommended action:	permitted by No.:
Data	Date:
Date:	Authorized Signature
DISTRICT EPR	PRODUCTION OCT 2 4 2013 UIC 10-24-13
Mail to: Past Operator New Operat	or District

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

#### Side Two

#### Must Be Filed For All Wells

4

Lease Name:	MARY HORNER		* Location: 6 28 36WSW			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (OlVGas/INJ/WSW)	Mell Status (PROD/TA'D/Abandone	
2	15067202990000	1320FSL	3960FEL	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			
		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			
			FEL/FWL			
		FSL/FNL				
COLVERNMENT COLUMN MERCHANICA	Anadas (Anadas	Supplication of the suppli				
				TO CHANNEL SERVICE AND		
An The Annual State Stat	mer consider \$4.000 to the design of the consideration of the considerat	FSL/FNL FSL/FNL			entragement and resident and re	
		FSL/FNL		KANS	RECEIVED AS CORPORATION COMMISSION	
			FEL/FWL		JUN 1 8 2013	
	water the same of	FSL/FNL	FEL/FWL		CONSERVATION DIVISION	

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 luty 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 Borenole 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.

5209	Well Location:				
OPERATOR: License # 5208  Name: EXXONMOBIL OIL CORPORATION	CHI C OO	Eas X West			
Name: EXXONMOBIL OIL CORPORATION Address 1: P. O. BOX 4358	to represent the control of the cont				
Address 2:	MADY HODNED				
City: HOUSTON State: TX					
Contact Person: ADAM SCOTT	T028S - R036W: SEC 006 S2 NE4, SE4, E2 SW4, SE4	T028S - R036W: SEC 006 S2 NE4, SE4, E2 SW4, SE4 NW4			
Phone: ( 713 /31-\260 Fax: (		SWSW)			
Email Address: <u>adam.e.scott@exxonmob</u>	· · · · · · · · · · · · · · · · · · ·				
Surface Owner Information:					
Name: See Attached	When filing a Form T-1 involving multiple surface owners sheet listing all of the information to the left for each su	s, attach an additional - ntace owner. Surtace			
Address 1:	awner information can be found in the records of the rec	gister of deeds for the			
Address 2:		county treasures.			
City: State:	p:+				
are preliminary non-binding estimates. The Select one of the following:	ocations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat	Thay be submitted.			
owner(s) of the land upon which CP-1 that I am filling in connection	s Surface Owner Notice Act (House Bill 2032), I have provided the following to subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form the this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) recress, phone number, fax, and email address.	to to the form			
KCC will be required to send this	o the surface owner(s). I acknowledge that, because I have not provided this info formation to the surface owner(s). To mitigate the additional cost of the KCC pe charged a \$30,00 handling fee, payable to the KCC, which is enclosed with this f	enorming usis			
If choosing the second option, submit pa form and the associated Form C-1, Form	ent of the \$30.00 handling fee with this form. If the fee is not received with this 3-1, Form T-1, or Form CP-1 will be returned.	form, the KSONA-1			
I hereby certify that the statements made	rein are true and correct to the best of my knowledge and belief.				
Date: 6/15/2013 Signature of O	inter or Agent:	Manager			
API # :15067202990000	KDOR #207348 KANSAS COR	RECEIVED PORATION COMMISSION			

JUN 1 8 2013

### **Surface Owners**

API#: 15067202	2990000	Lease Name:	MARY HORN	NER
Owner Name:	MCBRIDE INVEST	TMENTS LLC		
Address:	1400 S MAIN			
City:	HUGOTON	State:	KS Zip:	67951
Owner Name:				
Address:				
City:		State:	Zip	):
Owner Name:				
Address:				
City:		State:	Zip	:
Owner Name: Address:				
City:		State:	Zip	:
Owner Name: Address:				
City:		State:	Zip	):

RECEIVED KANSAS CORPORATION COMMISSION

Well #: \_2\_\_\_\_

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS