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 Effective Date of Transfer: Oil Lease: No. of Oil Wells 207387 Gas Lease: No. of Gas Wells _ KS Dept of Revenue Lease No.: __ Gas Gathering System: Lease Name: PETROTATE Saltwater Disposal Well - Permit No.: _ __feetfrom 🔲 N / 🦳 S Line Legal Description of Lease: __feet from 🔲 E / 🔲 W Line T027S - R036W: SEC 008 All Enhanced Recovery Project Permit No.: _ Entire Project: Yes No County: Grant Number of Injection Wells. Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE **COUNCIL GROVE** Production Zone(s):___ ** Side Two Must Be Completed. Injection Zone(s): leet from N / S Line of Section Surface Pit Permit No.: _ (API No. If Drill Pit, WO or Haul) feet from E / W Line of Section Haul-Off Workover OR Drilling Settling Type of Pit: "] Bum Emergency LAURIE KILBRIDE 5208 Past Operator's License No. Contact Person: RECEIVED KANSAS CORPORATION COMMISSION Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 Date: RSO MANAGER/AGENT & ATTORNEY-IN-FACT Signature: Andrew D. Cole WICHITA, KS **BRENDA WALLER** 32864 Contact Person: New Operator's License No. -New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: Oil / Gas Purchaser: WGP-KHC LLC 210 PARK AVENUE, SUITE 2350 05/31/2013 **OKLAHOMA CITY, OK 73102** Signature: Douglas C. Schultze Title: SR. OPERATIONS VICE PRESIDENT Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #____ 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 of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by __ . Recommended action: _ permitted by No.: ___ Authorized Signature Authorized Signature DISTRICT _ New Operator Mail to: Past Operator_

Side Two

Must Be Filed For All Wells

KDOR Lease * Lease Name	DETROTATE		* Location: 8	27 36W SE	VALAN :	
Well No.	API No. (YR DRLD/PRE '67)	Foolage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/NJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
2	15067203200000	1320FSL	1320FEL	GAS	ACTIVE	
					_	
	-	FSL/FNL	FEL/FWL	programming the Milliand Report of the Control of t		
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	111111111111111111111111111111111111111	FSL/FNL	FEL/FWL	Carlotte Control of the Control of t	CONSERVATION DIVISION	
		FSL/FNL	FEL/FWL		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
July 2010
Form Must Be Typed
Form must be Signed
Ul 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 dirtenti CB-1 (Cathodic Protection Borehole Intent	XT-1 (Transfer) CP-1 (Plugging Application)		
AMEDATAD, Licenses # 5208	Well Location:			
OPERATOR: License # 5208 Name: EXXONMOBIL OIL CORPORATION	C.C.	SE_Sec.8Twp.27 _ S. R.36Eas(X) West		
Address 1: P. O. BOX 4358		County: Grant		
Address 2:		Lease Name: PETROTATE Well #: 2		
City: HOUSTON State: TX Zip:		If filing a Form T-1 for multiple wells on a lease, enter the legal description		
Contact Person: ADAM SCOTT	the lease below:			
Phone: (713 #31 1859 Fax: (71	13 431-1475 T027S - R036W: SEC 00	o All		
Email Address: adam.e.scott@exxonmobil.con				
Surface Owner Information:				
Name: See Attached	When filing a Form T-1 in	When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface		
Address 1:	owner information can be	tound in the records of the register of deeds for the		
Address 2:	A TO STANLEY CO.	tale property tax records of the county freasurer.		
Crty:State:Zip:	:+			
Select one of the following:	cations may be entered on the Form C-1 plat, Form Surface Owner Notice Act (House Bill 2032), I ha	ve provided the following to the surface		
CP-1 that I am filing in connection with	subject well is or will be located; 1) a copy of the Fo h this form; 2) if the form being filed is a Form C-1 o ess, phone number, fax, and email address.	r Form CB-1, the plat(s) required by this		
KCC will be required to send this info	the surface owner(s). I acknowledge that, because imation to the surface owner(s). To mitigate the acharged a \$30.00 handling fee, payable to the KCC.	iditional cost of the KCC performing this		
If choosing the second option, submit payment form and the associated Form C-1, Form CB-	nt of the \$30.00 handling fee with this form. If the l 1, Form T-1, or Form CP-1 will be returned.	ee is not received with this form, the KSONA-1		
I hereby certify that the statements made here	ein are true and correct to the best of my knowledge	e and belief.		
Date: 6/15/2013 Signature of Operator	tor or Agent:	Tille: Regional Land Manager		
API # :15067203200000	KDOR #207387	RECEIVED KANSAS CORPORATION COMMISSION		

JUN 1 8 2013

Surface Owners

\PI#:	1506720	3200000	Lease Name: _	PETROTATE				
-								
Owner Name: PETRO, RICHARD & RITA FAMILY PTNSP LTD Address: 112 EGRET COVE								
	Citv:	GEORGETOWN	State:	TX Zip:	78633			
	, .			-•-				
Owi	ner Name Address	-						
	City	:	State:	Zip:				
Owr	ner Name							
	Address							
	City	:	State:	Zip:				
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OWI	ner Name: Address:							
	City:		State:	Zip:				
Owr	ner Name:	:						
	Address	:						
	City:		State:	Zip:				

RECEIVED KANSAS CORPORATION COMMISSION

Well #: 2

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS