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#### 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.: 208327		
Gas Gathering System:	Lease Name: JA PORTER		
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.:	T032S - R037W: SEC 009 SE4 SEC 010 W2, NE4		
Entire Project: Yes No			
Number of Injection Wells**	County: Stevens		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE		
** Side Two Must Be Completed.			
- Cite in must be completed.	Injection Zone(s):		
Surface Pit Permit No.:	leet from N / S Line of Section		
(API No. II Drill Pit, WO or Haul)	leet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover D C Drilling		
Past Operator's License No	Contact Person: LAURIE KILBRIDE		
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 KANSAS CORPORATION COMMISSION		
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013		
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole		
1 lue	CONSERVATION DIVISION WICHITA, KS		
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: ONEOK FIELD SERVICES		
OKLAHOMA CITY, OK 73102	Dale: 05/31/2013		
Title: _ SR. OPERATIONS VICE PRESIDENT	Signaturo: Douglas C. Schultze		
Title: _ SK. OPERATIONS VICE PRESIDENT	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection a			
	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the a	шоув іпјесноп welits) ог ріт реттік.		
is acknowledged as	is acknowledged as		
<u>-</u>	-		
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.:		
Date:	Date:		
	MOV 0 1 2012		
DISTRICT EPR /0/3//3 F Mail to: Past Operator New Operator			
1 1104 Obelan	- William -		

#### Side The

#### Must Be Filed For All Wells

* Lease Name: JA PORTER			Location: 10	* Location: 10 32 37W: NU			
Well No.	API No. (YR DRLD/PRE '67)	Foolage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oi/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)		
12	15189201310000 🗸	3960FSL	3960FEL	GAS	ACTIVE		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
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		FSL/FNL		KANS	RECEIVED AS CORPORATION COMMISSION		
					JUN 1 8 2013		
					CONSERVATION DIVISION WICHITA, KS		
<del></del>		FSL/FNL			THOURIN, NO		
		ESI /ENI	EFI /EWI				

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

hay 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.

OPERATOR: License # 5208	1	Well Location:		
Name: EXXONMOBIL OIL CORPORATI	ON			
Address 1: P. O. BOX 4358		County: Stevens		
Address 2:		Lease Name: J A PORTER Well #: 1-2		
City: HOUSTON State: TX Zip: 77210 + 4358		If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: ADAM SCOTT	Residence (m. Landence Residence Res	the lease below: T032S - R037W: SEC 009 SE4 SEC 010 W2, NE4		
Phone: ( 713 431 1859 Fax	: { 713 431-1475	10323 - R03/W: SEC 008 SE4 SEC 010 WZ, NE4		
Email Address: adam.e.scott@exxonmo	bil.com			
Surface Owner Information:				
Name: See Attached	See Attached When filing a Form T-1 involving multiple surface owners, attach an addition			
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:+			
owner(s) of the land upon which CP-1 that I am filing in connection form; and 3) my operator name,	n the subject well is or will be located on with this form; 2) if the form being address, phone number, fax, and el ion to the surface owner(s). I ackno	owledge that, because I have not provided this information, the		
MCC will be required to send the				
KCC will be required to send the task, I acknowledge that I am be		payable to the KCC, which is enclosed with this form.		
task, I acknowledge that I am be If choosing the second option, submit p	eing charged a \$30.00 handling fee, ayment of the \$30.00 handling fee	payable to the KCC, which is enclosed with this form.  with this form. If the fee is not received with this form, the KSONA-1		
task, I acknowledge that I am be If choosing the second option, submit p form and the associated Form C-1, For	eing charged a \$30.00 handling fee, ayment of the \$30.00 handling fee in n CB-1, Form T-1, or Form CP-1 will	payable to the KCC, which is enclosed with this form.  with this form. If the fee is not received with this form, the KSONA-1 the returned.		
task, I acknowledge that I am be If choosing the second option, submit p form and the associated Form C-1, For	eing charged a \$30.00 handling fee, ayment of the \$30.00 handling fee in n CB-1, Form T-1, or Form CP-1 will	payable to the KCC, which is enclosed with this form.  with this form. If the fee is not received with this form, the KSONA-1 lbe returned.  best of my knowledge and belief.		

JUN 1 8 2013

#### **Surface Owners**

API#: 15189201310000 Well #: \_\_1-2 Owner Name: RANDLE, JOAN REV TR ETAL TTEES Address: 1149 ROAD X City: HUGOTON State: KS **Zip:** 67951-5217 **Owner Name:** Address: City: State: Zip: **Owner Name:** Address: City: State: Zip: **Owner Name:** Address: City: State: Zip: Owner Name: Address: State: City: Zip:

Lease Name: JA PORTER

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS