### 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:	tied 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.: 202142		
Gas Gathering System:	Lease Name: W R KEYER		
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 - R037W: SEC 012 SE4, SW4, NW4, NE4		
Entire Project: Yes No			
Number of Injection Wells***	County: Stevens		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE		
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:(API No. If Drill Pit, WO or Haul)	teet from N / S Line of Section		
Type of Pit: Emergency Bum Settling	Haul-Off Workover Drilling		
	Contact Dames LAURIE KILBRIDE		
Past Operator's License No	Contact Person:RECEIVED		
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 KANSAS CORPORATION COMMISSIO		
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 JUN 1 8 2013		
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: <u>Andrew D. Cole</u> CONSERVATION DIVISION WICHITA. KS		
32864	Contact Person: BRENDA WALLER		
New Operator's License No. 32864	40E 240 2250		
New Operator's Name & Address: XTO ENERGY INC.	PTIONE:		
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 noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
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 / 0/38/13	PRODUCTION .001 2 443 UIC 10-29-13		
Mail to: Past Operator New Opera	itor District		

#### Side Two

Must Be Filed For All Wells

Lease Name	W R KEYER * Location: 12 31 37WSビ					
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)	
B1	15189100910000 🗸	2310FSL	2310FEL	GAS	ACTIVE	
<del></del>		FSL/FNL	FEL/FWL			
	_	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	4		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	_	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
,		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL	And and the second year of the second property of the second seco		
		F\$L/FNL	FEL/FWL			
	_	FSL/FNL	FEL/FWL		RECEIVED CANSA <del>S CORPORATION COMMISSI</del>	
		FSL/FNL	FEL/FWL		— <del>111N 1 8 2013</del>	
		FSL/FNL	FEL/FWL			
		ESI /ENI	FEL/FWL		WICHITA, KS	

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 f	iled: C-1 (Intent) CB-1 (Cathodic Pro	hotection Borehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 5208	Well	Location:		
Name: EXXONMOBIL OIL CORPORATI		SE_Sec. 12 Twp.31 S. R. 37 Eas X Wes		
Address 1: P. O. BOX 4358		nrty: Stevens		
Address 2:		se Name: WRKEYER Well #: B1		
City: HOUSTON State: TX		ing a Form T-1 for multiple wells on a lease, enter the legal description		
Contact Person: ADAM SCOTT	the le	lease below:		
Phone: { 713 431- 1850 Fax	713 431-1475	31S - R037W: SEC 012 SE4, SW4, NW4, NE4		
Email Address: adam.e.scott@exxonmo	bll.com			
Surface Owner Information:				
Name: See Attached	When	en filing a Form T-1 involving multiple surface owners, attach an addition		
Address 1:	sheeowne	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:	coun	nty, and in the real estate property tax records of the county treasurer.		
City: State:	Zip:+			
are preliminary non-binding estimates.  Select one of the following:  X I certify that, pursuant to the Kowner(s) of the land upon which CP-1 that I am filling in connectiform; and 3) my operator name;	The locations may be entered on the Forenses Surface Owner Notice Act (House the subject well is or will be located: 1 on with this form; 2) if the form being file address, phone number, fax, and emails for the surface owner(s). Lacknowle	edge that, because I have not provided this information, the		
KCC will be required to send the task, I acknowledge that I am be	is information to the surface owner(s). eing charged a \$30.00 handling fee, pay	To mitigate the additional cost of the KCC performing this syable to the KCC, which is enclosed with this form.		
If choosing the second option, submit p form and the associated Form C-1, For	ayment of the \$30.00 handling fee with m CB-1, Form T-1, or Form CP-1 will be	h this form. If the fee is not received with this form, the KSONA e returned.		
I hereby certify that the statements made	e herein are true and correct to the bes	st of my knowledge and belief.		
Date: 6/15/2013 Signature of	Operator or Agent:			
		KANSAS CORPORATION CO		
API # :15189100910000	KDOR #202142	HIM 1 8 20		

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

#### **Surface Owners**

API#:	15189100910000	Lease Name: _	W R KEYE	₹	Well #: <u>B1</u>	•
•	ner Name: FOX, ROBERT C					
Owi						
	Address: PO BOX 125					
	City: MOSCOW	State:	KS Zip	o: 67952-0125		
Ow	mer Name: Address:					
		Otata	7	ı		
	City:	State:	2	ip:		
Ow	mer Name:					
	Address:					
	City:	State	: Zi	p:		
Ow	ner Name:					
	Address:					
	City:	State:	Zi	p:		
Ow	mer Name:					
	Address:	•				
	City:	State	: z	p:		

\_\_\_\_\_ Well #: <u>B1</u>

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS