KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 7-1 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 Hotification Act, Check Applicable Boxes: MUST be submitted with this form. Oil Lease: No. of Oil Wells 7/1/2013 Effective Date of Transfer-Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: __ 202144 Gas Gathering System:. Lease Name: W KUHN Saltwater Disposal Well - Permit No.: ___ SE Sec. 34 Twp. 30 R _____feet from N/ S Line Legal Description of Lease: ___feet from E / W Line T030S - R035W: SEC 034 S2, W2 NE4, NE4 NE4, SE4 NW4, N2 Enhanced Recovery Project Permit No.:_ NW4, SW4 NW4, SE4 NE4 Entire Project: Yes No Number of Injection Wells County: Grant Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): CHASE ** Side Two Must Be Completed. Injection Zone(s): Surface Pit Permit No.: _ lest from N / S Line of Section (API No. If Drill Pit, WO or Haul) E / W Line of Section □ Bum Type of Pit: Emergency Settling Haul-Off Workover / Drilling Past Operator's License No. 5208 **LAURIE KILBRIDE** Contact Person-Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION RECEIVED Phone: 713-431-1182 S CORPORATION COMMISSION P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 Date: __ **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: ___Andrew D. Cole ONSERVATION DIVISION WICHITA, KO New Operator's License No. 32864 **BRENDA WALLER** Contact Person: New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: . 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: WGP-KHC LLC **OKLAHOMA CITY, OK 73102** 05/31/2013 Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultze Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #___ has been 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 and may continue to inject fluids as authorized by the new operator of the above named lease containing the surface pit ___ . Recommended action: permitted by No.: ____ Date: Authorized Signature Authorized Signature DISTRICT .

New Operator

Mail to: Past Operator_

Side Two

Must Be Filed For All Wells

* Lease Name	W KUHN	* Location: 34 30 35W SE					
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Section Line rom South Line)	Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned		
A1	15067001960000 🗸	2310FSL	2310FEL	GAS	ACTIVE		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
	-	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		-		
		FSUFNL	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	4			
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL	-			
		FSL/FNL	FEL/FWL				
		FSUFNL	FEL/FWL				
The incidence of the American State (Machine)		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
	<u> </u>	FSL/FNL	FEL/FWL		RECEIVED		
		FSL/FNL	FEL/FWL .	KANS	AS CORPORATION COMMISSION		
		FSL/FNL	FEUFWL		JUN 1 8 2013		
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION 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 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	
Name: EXXONMOBIL OIL CORPORATION	Well Location:
Address 1:P. O. BOX 4358	
Address 2:	
City: HOUSTON State: TX Zip: 77210	1000
Contact Person: ADAM SCOTT	the lease below:
Phone: (713 431-1850 Fax: (713 431-147	5 T030S - R035W: SEC 034 S2, W2 NE4, NE4 NE4, SE4 NW4, N2 NW4, SW4 NW4, SE4 NE4
Email Address: adam.e.scott@exxonmobil.com	
Surface Owner Information:	
Name: See Attached	When filing a Form T.1 involving multiple surface owners, attach an additional
Address 1:	sheet listing all of the information to the left for each surface owner. Surface
Address 2:	owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.
City: State: Zip:	
Owner(s) of the faild upon which the subject well	wher Notice Act (House Bill 2032), I have provided the following to the surface is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form
CP-1 that I am filing in connection with this form; a form; and 3) my operator name, address, phone n	2) If the form being field is a Form C-1 or Form CD 1, the platte treatment but his
vec an pereduien to send this illigituation to the	owner(s). I acknowledge that, because I have not provided this information, the he surface owner(s). To mitigate the additional cost of the KCC performing this 0.00 handling fee, payable to the KCC, which is enclosed with this form.
f choosing the second option, submit payment of the \$30 form and the associated Form C-1, Form CB-1, Form T-1,	0.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 or Form CP-1 will be returned.
hereby certify that the statements made herein are true ϵ	and correct to the best of my knowledge and belief.
Date: 6/15/2013 Signature of Operator or Agent:	M. Michael McNulty Tille: Regional Land Manager
API # :150670019600000 KD	POR #202144 RECEIVED KANSAS CORPORATION COMMISSIO

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

JUN 1 8 2013

Surface Owners

AP#:	150670019	60000	Lease Name:	W KU	HN		V	Vell #: <u>A1</u>	
Own	er Name: LA	HEY, VANCE A	TRUST						
	Address: 27	11 RD Z							
	City: MC	oscow	State:	KS	Zip:	67952			
Own	er Name:								
	Address:								
	City:		State:		Zip:				
	er Name:								
•	Address:								
	City:		State:		Zip:				
Owne	r Name:								
	ddress:								
	City:		State:		Zip:				
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	r Name: ddress:								
	City:		State:		Zip:				

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS