### 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:			
X Gas Lease: No. of Gas Wells "	KS Dept of Revenue Lease No.: 208497 V  Lease Name: WAECHTER			
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	Legal Description of Lease:			
feet from E / W Line	T027S - R037W: SEC 006 All			
Enhanced Recovery Project Permit No.:	102/3 - R03/W. SEC 000 All			
Entire Project: Yes No				
Number of Injection Wells**	County: Grant Production Zone(s): COUNCIL GROVE			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE				
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.:(API No. II Drill Pit, WO or Haul)	leet from N / S Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Of Drilling			
	Cartan Samuel LAURIE KILBRIDE			
Past Operator's License No	Contact Person:			
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182			
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 RECEIVED			
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole KANSAS CORPORATION COMMISSION			
32864	Garage Parrage BRENDA WALLER			
New Operator's License No	ANE 210-22EQ WICHITA, KS			
New Operator's Name & Address: XTO ENERGY INC.	Priche:			
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES			
OKLAHOMA CITY, OK 73102	Date: 05/31/2013			
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze			
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duty 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.:			
	Date:			
Date:	Date:Authorized Signature			
DISTRICT EPR /0/23//3	PRODUCTION OCT 2 4 2013 UIC 10-24-13			
Mail to: Past Operator New Opera	man a s.a.			

#### Side Two

### Must Be Filed For All Wells

Lease Name:	WAECHTER		Location: 6 27 37WSW			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
A12	15067600020001	2310FSL	2970FEL	GAS	ACTIVE	
		FSL/FNL	FEL/FWL	Harmon and the same of the sam		
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****	The second of th	FSL/FNL	FEL/FWL		JUN 1 8 2013	
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION 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 filed:C-1 (Intent)C-1	B-1 (Cathodic Protection Borehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 5208	Well Location:
Name: EXXONMOBIL OIL CORPORATION	
Address 1: P. O. BOX 4358	County: Grant
Address 2:	Leaso Name: WAECHTER Well #: A12
City: HOUSTON State: TX Zip: 77210 + 4358	
Contact Person: ADAM SCOTT	Photo (concer freibite)
Phone: ( 713 431 /859 Fax: ( 713 431-1475	
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 sheet listing all of the information to the left for each surface owner. Surface
Address 1:	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:	<del>-</del>
Select one of the following:	red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. tice Act (House Bill 2032), I have provided the following to the surface
awards of the tend upon which the subject well is Of Will	t be located: 1) a copy of the Form C-1, Form CB-1, Form 1-1, or Form form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
VCC will be required to send this information to the SUM	<ul> <li>s). I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this nothing fee, payable to the KCC, which is enclosed with this form.</li> </ul>
If choosing the second option, submit payment of the \$30.00 har form and the associated Form C-1, Form CB-1. Form T-1, or Form	ndling fee with this form. If the fee is not received with this form, the KSONA-1 in CP-1 will be returned.
I hereby certify that the statements made herein are true and com	rect to the best of my knowledge and belief.
Date: 6/15/2013 Signature of Operator or Agent: 20. 2	Michael McNulty Tille: Regional Land Manager KANSAS CORPORATION COMMISSION
API # :15067600020001 KDOR #20	JUN 1 8 2013

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

CONSERVATION DIVISION WICHITA, KS

## **Surface Owners**

AP#: 15067600020001	Lease Name: WAE	CHTER
A. III. 100070000	<u></u>	
Owner Name: TNT CATTLE CO	LLC	
Address: ATTN: TYLER BA		
Address: Alin: ITLER DA	ANEN	
City: ULYSSES	State: KS	<b>Zip:</b> 80907
Owner Name:		
Address:		
Audiess.		
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 #: \_\_A1--2\_

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS