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: 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.: Gas Gathering System: Lease Name: WEBER Saltwater Disposal Well - Permit No.: 9 Two. 33 R. 37W FEXW __feet from 🔲 N / 🔲 S Line Legal Description of Lease: ___ feet from 🔲 E / 🔲 W Line T033S - R037W: SEC 004 NW4, SW4 SEC 009 NE4, NW4 Enhanced Recovery Project Permit No.: _ 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. Injection Zone(s): Surface Pit Permit No.: _ test from N / S Line of Section (API No. If Drill Pit, WO or Haul) E / W Line of Section feet from Type of Pit: Emergency T Bum Settling Drilling Haul-Off Past Operator's License No. 5208 **LAURIE KILBRIDE** 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: <u>Andrew D. C</u>ole CONSERVATION DIVISION WICHITA, KS New Operator's License No. __32864 / **BRENDA WALLER** Contact Person: . New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: ONEOK FIELD SERVICES 05/31/2013 OKLAHOMA CITY, OK 73102 Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultre 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 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.: ___ Authorized Signature DISTRICT -Mail to: Past Operator_ New Operator

Side Two

Must Be Filed For All Wells

* Lease Name	WEBER	* Location: 9 33 37Wt/VW			
Well No.	API No. (YR DRLD/PRE '67)	Foolage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oli/Gas/INJ/WSW) (PROD/Ta'D/Abandoned)	
23	1518920331000q	1290FNL	1250FWL	GAS	ACTIVE
		FSL/FNL	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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEUFWL		
		FSL/FNL	FEL/FWL	Washington and the state of the	
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		FSUFNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	-	REGEIVED
		FSL/FNL	FEL/FWL		KANSAS CORPORATION COMMISSIO
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		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 Projection Forms of Injection or Surface Pit Permit); and CP-1 (Well In 1997), Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

OPERATOR: License #5208	Mark I		
Name: EXXONMOBIL OIL CORPORATION	Well Location:		
Address 1:P. O. BOX 4358	County: Stevens		
Address 2:			
City: HOUSTON State: TX Zip: 77210 ++ 4358			
Contact Person: ADAM SCOTT	the lease below: T033S - R037W: SEC 004 NW4, SW4 SEC 009 NE4, NW4		
Phone: { 713 431-1859 Fax: (713 431-1475			
Email Address: adam.e.scott@exxonmobil.com	_		
Surface Owner Information:			
Name: See Attached	When filing a Form 1.1 involving multiple surface owners, attach an additional		
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:			
City: State: Zip:+	_		
owner(s) of the land upon which the subject well is or will i	te Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this		
form; and 3) my operator name, address, phone number, fa	x, and email address.		
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the eowner(s). To mitigate the additional cost of the KCC performing this ling fee, payable to the KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form (ling fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.		
hereby certify that the statements made herein are true and correc	ct to the best of my knowledge and belief.		
Date: 6/15/2013 Signature of Operator or Agent: 70. 70.	tchael McNutty Title: Regional Land Manager		
API # :15189203310000 KDOR #2083	68 RECEIVED KANSAS CORPORATION COMMISSION		

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#: 15189203310000 Lease Name: WEBER Owner Name: MOSER FARM LIV TR, DENNIS E & ELIZABETH A CO-TTEES Address: 1932 ROAD 16 City: MOSCOW State: KS Zip: 67952-9518 Owner Name: Address: City: State: Zip: **Owner Name:** Address: City: State: Zip: **Owner Name:** Address: City: State: Zip: Owner Name: Address: City: State: Zip:

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Well #: _2-3

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS