### 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,
MIST he submitted with this form

Check Applicable Boxes: MUST be submit	tied with this form.
Check Applicable Boxes:  Oil Lease: No. of Oil Wells	Effective Date of Transfer: 7/1/2013  KS Dept of Revenue Lease No.: 210460  Lease Name: BARBEE
Entire Project:Yes No Number of Injection Wells ** Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE *** Side Two Must Be Completed.	County:Stevens Production Zone(s):CHASE Injection Zone(s):
Surface Pit Permit No.:  (API No. II Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling	leet from N / S Line of Sectionleet from E / W Line of Section  Haul-Off Workover D Drilling
Past Operator's License No. 5208  Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION P. O. BOX 4358, HOUSTON, TX 77210-4358  Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Contact Person: LAURIE KILBRIDE  Phone: 713-431-1182  Date: 05/31/2013  KANSAS CORPORATION COMMISSIO  Signature: Andrew D. Cole  JUN 1 8 2013
New Operator's License No. 32864  New Operator's Name & Address: XTO ENERGY INC.  210 PARK AVENUE, SUITE 2360  OKLAHOMA CITY, OK 73102	Contact Person: BRENDA WALLER WICHTA, KS  Phone: 405-319-3259  Oil / Gas Purchaser: ONEOK FIELD SERVICES  Date: 05/31/2013
Title: SR. OPERATIONS VICE PRESIDENT  Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duty recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the a	Commission. This acknowledgment of transfer pertains to Kansas Corporation
is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action:	the new operator of the above named lease containing the surface pit permitted by No.:
1	PRODUCTION NOV 0 8 2013 UIC 128-12 District

#### Side Two

#### Must Be Filed For All Wells

* Lease Name: BARBEE		• Location: 18 33 36W SE			
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fo	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)
12 INF	15189205120002	485 400FSL	GPS 1980FEL	- Dist /.	ACTIVE
		FSL/FNL			
	-	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		<del></del>
		FSL/FNL	FEL/FWL		<del>.</del> -
		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		RECEIVED NSAS CORPORATION COMMISSION
		FSL/FNL	FEL/FWL	KAI	
		FSL/FNL	FEL/FWL	Miles and a second seco	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.

OPERATOR: License #5208	Well Location:				
Name: EXXONMOBIL OIL CORPORATION	N	_ <u>SE</u> Sec. 18 Twp.33 S. R. 36 Eas X West			
Address 1: P. O. BOX 4358	County: Steve	ens			
Address 2:	Lease Name:	BARBEE Well #: 12 INF			
City: HOUSTON State: TX		It filing a Form T-1 for multiple wells on a lease, enter the legal description of			
Contact Person: ADAM SCOTT		the lease below: T033S - R036W: SEC 018 E2 W2, E2 (NWNW) (SWNW)			
Phone: ( 713 431- 1859 Fax: (	(NWSW) (SW	* * * *			
Email Address: <u>adam.e.scott@exxonmobl</u>	l.com				
Surface Owner Information:					
Name: See Attached					
Address 1:		I of the information to the left for each surface owner. Surface tion can be found in the records of the register of deeds for the			
Address 2:		the real estate property tax records of the county treasurer.			
City: State:	. Zip:+				
Select one of the following:	·	at, Form CB-1 plat, or a separate plat may be submitted.			
owner(s) of the land upon which to CP-1 that I am filing in connection	he subject well is or will be located: 1) a copy	932), I have provided the following to the surface of the Form C-1, Form CB-1, Form T-1, or Form orm C-1 or Form CB-1, the plat(s) required by this is			
KCC will be required to send this		because I have not provided this information, the ite the additional cost of the KCC performing this he KCC, which is enclosed with this form.			
	ment of the \$30.00 handling fee with this form CB-1, Form T-1, or Form CP-1 will be returned	n. If the fee is not received with this form, the KSONA-1			
hereby certify that the statements made I	herein are true and correct to the best of my ki	nowledge and belief.			
Date: 6/15/2013 Signature of Ope	erator or Agent:	Title: Regional Land Manager			
API # :15189205120002	KDOR #210460	RECEIVED KANSAS CORPORATION COMMISS			

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

CONSERVATION DIVISION WICHITA, KS

JUN 1 8 2013

### **Surface Owners**

Address:

City:

AP#: 15189205120002 Lease Name: **BARBEE** Well #: 1-2 INF Owner Name: PORTER, GARY L Address: 1695 ROAD P City: HUGOTON State: KS **Zip:** 67951-5146 Owner Name: VJ LAND & CATTLE CO INC Address: 815 S VAN BUREN City: HUGOTON Zip: 67951-2301 State: KS **Owner Name:** Address: City: State: Zip: **Owner Name:** Address: City: State: Zip: Owner Name:

State:

Zip:

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS