KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

070113_Forward_34.pdf
Form T-1
March 2010
Form must be Typed
Form must be Signed
All blanks must be Filled

1. Malan

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: MUST be sub	omitted with this form.
Oil Lease: No. of Oil Wells X Gas Lease: No. of Gas Wells Gas Gathering System: Saltwater Disposal Well - Permit No.: feet from N / S Line feet from E / W Line Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Effective Date of Transfer: 7/1/2013 KS Dept of Revenue Lease No.: 208253 Lease Name: FORWARD
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:(API No. If Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	leet from N / S Line of Section E / W Line of Section Haul-Off Workover OL Drilling
Past Operator's License No 5208 /	Contact Person:LAURIE KILBRIDE
	RECEIVED
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 KANSAS CORPORATION COMMISSION
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 JUN 1 8 2013
Title:RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole CONSERVATION DIVISION WICHITA. KS
New Operator's License No. 32864	Contact Person: BRENDA WALLER
New Operator's Name & Address: XTO ENERGY INC.	40F 240 20F2
210 PARK AVENUE, SUITE 2350	Phone:405-319-3259
	Oil / Gas Purchaser: ONEOK FIELD SERVICES
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 duty recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	n authorization, surface pit permit # has been n Commission. This acknowledgment of transfer pertains to Kansas Corporation 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.:
Date:	Date:
DISTRICT EPR	Authorized Signature
Mail to: Past Operator New Opera	PRODUCTION NOV 0 4 2013 UIC \\~ \(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	LISINC

Must Be Filed For All Wells

Lease Name:	FORWARD		Location: 5	34 38W NW	WW.	
Well No.	API No. (YR DRLD/PRE '67) 15189202520000	Foolage from (i.e. FSL = Feet f	Foolage from Section Line (i.e. FSL = Feet from South Line)		Well Status SW) (PROD/TA'D/Abandone	
12		3960FSL	3960FEL	GAS	APPLYONE EXP. 6/2	
	The state of the s	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL	4-190		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	KANSA	RECEIVED AS CORPORATION COMMISSION	
		FSL/FNL	FEL/FWL		JUN 1 8 2013	

A separate sheet may be attached if necessary

_FSL/FNL __

FEL/FWL _

CONSERVATION DIVISION

WICHITA, KS

^{*} 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 Part & 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 (Inte	(Cethodic 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: Stevens
Address 2:	Lease Name: FORWARD Well #: 12
City: HOUSTON State: TX Zip: 77210 +	4358 If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	the lease below:
Phone: (713 431- 1859 Fax: (713 431-1475	T034S - R038W: SEC 005 S2 NE4, SE4, W2 SW4, E2 SW4, S2 NW4 (NENE) (NWNE) (NENW) (NWNW)
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:	chart lictime all at the information to the bit he and audien more. Contains
Address 2:	
City: State: Zip:	
Select one of the following:	be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well CP-1 that I am filing in connection with this form; a form; and 3) my operator name, address, phone n	
KCC will be required to send this information to the	owner(s). I acknowledge that, because I have not provided this information, the e surface owner(s). To mitigate the additional cost of the KCC performing this .00 handling fee, payable to the KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30 form and the associated Form C-1, Form CB-1, Form T-1,	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.
i hereby certify that the statements made herein are true a	nd correct to the best of my knowledge and belief.
Date: 6/15/2013 Signature of Operator or Agent: _	M. Michael McNutty Regional Land Manager
API # :15189202520000 KD	DR #208253 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#:	1518920	2520000	Lease Name: _	FORWA	RD		Well #: _12
		POWERS, GLAD					- AMM
•		Attn: FREEMAN, 3 4630 N ONEAL R					
	City:	COLUMBIA	State:	MO	Zip:	65202-9159	
	er Name:						
	Address:						
	City:		State:		Zip:		
	er Name: Address:						
	City:		State:		Zip:		
	er Name: Address:						
	City:		State:		Zip:		
	r Name: .ddress:						
	City:		State:	2	Zip:		

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS