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: MUST be subm	titled with this form.				
Oil Lease: No. of Oil Wells	Effective Date of Transfer: 7/1/2013				
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 208273				
Gas Gathering System:	Lease Name: HEADRICK QUIGLEY				
Saltwater Disposal Well - Permit No.:					
Spot Location: feet from N / S Line					
feet from E / W Line	Legal Description of Lease:				
Enhanced Recovery Project Permit No.:	T035S - R037W: SEC 009 All				
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.: (API No. If Drill Pit, WO or Haul)	leet from N / S Line of Section				
Type of Pit: Emergency Burn Settling	Haul-Off Workover DR Drilling				
5000 /					
Past Operator's License No	Contact Person:LAURIE KILBRIDE				
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182				
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013				
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole				
	RECEIVED KANSAS CORPORATION COMMISSIO				
New Operator's License No. 32864	Contract Domony BRENDA WALLER				
New Operator's Name & Address: XTO ENERGY INC.	JUN 1 0 2013				
	CONSERVATION DIVISION				
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES WICHTA, KS				
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	authorization, surface pit permit # has been				
	Commission. This acknowledgment of transfer pertains to Kansas Corporation				
Commission records only and does not convey any ownership interest in the	•				
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.:				
. Hecommended action.	permited by rec:				
Date:	Date				
Authorized Signature	Date:				
DISTRICT EPR///8//3	PRODUCTION NOV 1 2 ZOIS UIC 1/2/2-13				
Mail to: Past Operator New Operator					

Side Two

Must Be Filed For All Wells

* Lease Name: HEADRICK QUIGLEY		* Location: 9 35 37WSW					
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned		
1	15189206350000 🗸	1250FSL	4030FEL	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	70 MM - 10			
		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			RECEIVED		

_ ____FSUFNL ____FEUFWL _

_ FSL/FNL ______ FEL/FWL .

_FSL/FNL _____FEL/FWL _

JUN 1 8 2013

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 #	Well Location:			
The second of th	SW Sec. 9 Twp.35 S. R. 37 EastX West			
Address 1:P. O. BOX 4358	County: Stevens			
ddress 2:	•			
city: HOUSTON State: TX Zip: 77210 ++ 4358	If filing a Form 1-1 for multiple wells on a lease, enter the legal description of the lease below:			
Phone: (713 #31 1859 Fax: (713 #31-1475	T035S - R037W: SEC 009 All			
mail Address: adam.e.scott@exxonmobil.com				
iurlace Owner Information:				
ame; 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 owner information can be found in the records of the register of deeds for the			
ddress 1:				
ddress 2:				
ity:+				
elect one of the following: I certify that, pursuant to the Kansas Surface Owner Notice (Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form			
owner(s) of the land upon which the subject well is or will be CP-1 that I am filling in connection with this form: 2) if the form	being filed is a Form C 1 or Form CD 1 the plate) sequired by this			
owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	being filed is a Form C-1 or Form CB-1, the plat(s) required by this			
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this			
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface or task, I acknowledge that I am being charged a \$30.00 handling choosing the second option, submit payment of the \$30.00 handling	being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this gifee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1			
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface or task, I acknowledge that I am being charged a \$30.00 handling choosing the second option, submit payment of the \$30.00 handling arm and the associated Form C-1, Form CB-1, Form T-1, or Form CP	being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this gifee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.			
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP thereby certify that the statements made herein are true and correct to	being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this gifee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.			

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#:	15189206350000	Lease Name: _	HEADRICK C	QUIGLEY	Well #: _1	
Own	er Name: VANNOVER FAF	RMS LC				
	Address: Attn: GRIFFITH, 615 OSAGE ST	BARBARA				
	City: NEODESHA	State:	KS Zip:	66757-1463		
	er Name:					
	Address:					
	City:	State:	Zip:			
	er Name: Address:					
	City:	State:	Zip:			
Owne	er Name:					
	Address:					
	City:	State:	Zip:			
	or Name: Address:					
	City:	State:	Zip:			

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS