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 authoritied with this form

Check Applicable Boxes: MUST be submi	Itled with this form.
Oil Lease: No. of Oil Wells	Effective Date of Transfer:
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:(API No. II Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from N / S Line of Sectionfeet from E / W Line of Section Haul-Off Workover P Drilling
Past Operator's License No. 5208 /	Contact Person: LAURIE KILBRIDE
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182
P. O. BOX 4358, HOUSTON, TX 77210-4358	05/31/2013
Titig: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole KANSAS CORPORATION COMMISSIO
New Operator's License No	Contact Person: BRENDA WALLER CONSERVATION DIVISION
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259 WICHITA, KS
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 a noted, approved and duly 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	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.:
Date:	Date:
1//7/12	PRODUCTIONNOV_0_8_Z013uic1-8-13
Mail to: Past Operator New Operato	

Side Two

Must Be Filed For All Wells

* Lease Name	HEGER Location: 35 33 36WSE						
Well No.	API No. (YR DRLD/PRE '67) 15189215610000/	Foolage from (i.e. FSL = Feet i	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned) ACTIVE		
1-3 INF		500FSL	500FSL 2490FEL				
		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	FEL/FWL				
		FSL/FNL	FEL/FWL	-	-		
		FSL/FNL	FEL/FWL				
		FSUFNL	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				
			FEL/FWL	KANSA	RECEIVED AS CORPORATION COMMISSION		
		FSL/FNL	FEL/FWL		JUN 1-8-2013		
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION		
		FSL/FNL	FEL/FWL		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 # 5208				
lame: EXXONMOBIL OIL CORPORATION	, amada ras educiónico de como de abeliance ediciónico de como	Sec. 35 Twp.33 S. R. 36 Eas X West		
ddress 1: P. O. BOX 4358		Stevens		
ddress 2:		ome: HEGER Well #: 1-3 INF		
ity: HOUSTON State: TX Zip:		If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
ontact Person: ADAM SCOTT	the lease	the lease below: T033S - R036W: SEC 035 NW4, SW4, SE4, NE4		
hone: (713 431 18F/4 Fax: (713	701-1470	11030W. SEC 038 RM4, SM4, SE4, RE4		
mail Address: adam.e.scott@exxonmobil.com				
urface Owner Information:				
ame: See Attached		ng a Form T.1 involving multiple surface owners, attach an additional		
ddress 1:	sheet list	ng all of the information to the left for each surface owner. Surface ormation can be found in the records of the register of deeds for the		
ddress 2:	county, a	or maken can be lound in the records of the register of deeds for the in the real estate property tax records of the county treasurer.		
ty:State:Zip:	+			
CANDER (2) OF THE BUILDING MICH WILLIAM SUID	Hect well is of will be located: 1) a i	■ 2032), I have provided the following to the surface copy of the Form C-1, Form CB-1, Form T-1, or Form a Form C-1 or Form CB-1, the plat(s) required by this		
form; and 3) my operator name, address,	, phone number, fax, and email add	e Form C-1 or Form CB-1, the plat(s) required by this ress.		
NCC will be required to send this information	ation to the surface owner(s). To m	that, because I have not provided this information, the litigate the additional cost of the KCC performing this to the KCC, which is enclosed with this form.		
choosing the second option, submit payment o rm and the associated Form C-1, Form CB-1, F	of the \$30.00 handling fee with this Form T-1, or Form CP-1 will be retu	form. If the fee is not received with this form, the KSONA-1 ned.		
nereby certify that the statements made herein a	are true and correct to the best of n	ny knowledge and belief.		
ote: 6/15/2013 Signature of Operator of	r Agent: M. Michael McNulty	Title: Regional Land Manager		
API # :15189215610000	KDOR #218949	RECEIVED KANSAS CORPORATION COMMIS		

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

AP#:	15189215610000	Lease Name: _	HEGER	Well #: _1-3 INF
				· .
Own	er Name: WHEELER INVE	STMENTS LP		
	Address: 2044 ROAD H			
	City: HUGOTON	State:	KS Zip : 67951-5184	
	ner Name: Address:			
	City:	State:	Zip:	
	er Name: Address:			
	City:	State:	Zip:	
	er Name: Address:			
	City:	State:	Zip:	
	er Name: Address:			
	City:	State:	Zip:	

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS