KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 1-1 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,

Check Applicable Boxes: MUST be submi	tted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 7/1/2013 KS Dept of Revenue Lease No.: 218999 Lease Name: MILLS			
X Gas Lease: No. of Gas Wells				
Gas Gathering System:				
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.:	T034S - R036W: SEC 001 NE4, NW4, SE4, SW4			
Entire Project: Yes No				
Number of Injection Wells **	County: Stevens			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE				
** Side Two Must Be Completed.	Production Zone(s): CHASE			
The same as well product	Injection Zone(s):			
Surface Pit Permit No.:				
(API No. II Drill Pit, WO or Haul)	leet from F F W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover 12 Drilling			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>			
Past Operator's License No	Contact Person: LAURIE KILBRIDE			
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 RECEIVED			
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 KANSAS CORPORATION COMMISSION			
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	1 0 0010			
1109.				
	CONSERVATION DIVISION WICHITA, KS			
New Operator's License No. 32864	Contact Person: BRENDA WALLER			
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259			
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES			
OKLAHOMA CITY, OK 73102	0210410040			
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u>			
	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 a	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:			
Authorized Signature /	Authorized Signature			
l	PRODUCTION NOV 0 8 2013 UIC 11-8-13			
Mail to: Past Operator New Operato	r District			

Side Tier

Must Be Filed For All Wells

Lease Name:	MILLS * Location; 1 34 36WNW						
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	15189215880000	4698FSL	2736FEL	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	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 CANSAS CORPORATION COMMISS		
			FEL/FWL		JUN 1 8 2013		
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION		

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	Well Location:	
Name: EXXONMOBIL OIL CORPORATION	N	- <u>MW</u> Sec. 1 Twp.34 S. R. 36 Eas X West
Address 1: P. O. BOX 4358	County: Steve	18
Address 2:	Lease Name: J	Well #: 12 INF
City: HOUSTON State: TX		7-1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	the lease belov	v: N: SEC 001 NE4, NW4, SE4, SW4
Phone: (713 431- 1859 Fax:	713 431-1475	7. 000 WT NE4, NW4, 004, 004
Email Address:adam.e.scott@exxonmol	il.com	
Surface Owner Information:		
Name: See Attached		orm T.1 involving multiple surface owners, attach an additional
Address 1:		of the information to the left for each surface owner. Surface on can be found in the records of the register of deeds for the
Address 2:		he 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 CP-1 that I am filing in connection	the subject well is or will be located: 1) a copy-	32), I have provided the following to the surface of the Form C-1, Form CB-1, Form T-1, or Form rm C-1 or Form CB-1, the plat(s) required by this
KCC will be required to send this		because I have not provided this information, the te the additional cost of the KCC performing this e KCC, which is enclosed with this form.
	yment of the \$30.00 handling fee with this form CB-1. Form T-1, or Form CP-1 will be returned.	. If the fee is not received with this form, the KSONA-1
hereby certify that the statements made	herein are true and correct to the best of my kn	owledge and belief.
Date: 6/15/2013 Signature of O	perator or Agent:	Title: Regional Land Manager
API # :15189215880000	KDOR #218999	RECEIVED

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#: 15189215880000

Lease Name:

MILLS

AP#: 15189215880000	Lease Name: _	MILLS		Well #: _	1–2 INF
		_			
Owner Name: MILLS, M DC Address: 979 ROAD 2		S,			
City: HUGOTON	State:	KS Zip:	67951-5105		
Owner Name: Address:					
City:	State:	Zip	:		
Owner Name: Address:					
City:	State:	Zip:			
Owner Name: Address:					
City:	State:	Zip:			
Owner Name: Address:					
City:	State:	Zip:			

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS