KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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: Oil Lease: No. of Oil Wells 7/1/2013 Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 208318 Gas Gathering System: Lease Name: PARKER Saltwater Disposal Well - Permit No.: ... NW Sec. 6 Two. 32 R feet from N/S Line Legal Description of Lease: ... teet from 🔲 E / 🔲 W Line T032S - R036W: SEC 006 SE4, S2 NE4, SE4 NW4, E2 SW4 Enhanced Recovery Project Permit No.: _ (NENE) (NWNE) (NENW) (NWNW) (SWNW) (NWSW) (SWSW) Entire Project: Yes No Number of Injection Wells. County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE **COUNCIL GROVE** Production Zone(s): ** Side Two Must Be Completed. Injection Zone(s): Surface Pit Permit No.: feet from N / S Line of Section (API No. If Drill PIL WO or Haul) feet from E / W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover nR [Past Operator's License No. 5208 V **LAURIE KILBRIDE** Contact Person: RECEIVED Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: _713-431-1182 KANGAS CORPORATION COMMISSION P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 Date. IIIN 1 8 2013 **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: ____Andrew D. Cole CONSERVATION DIVISION WICHITA KS New Operator's License No. 32864 **BRENDA WALLER** Contact Person: . New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: ONEOK FIELD SERVICES 05/31/2013 OKLAHOMA CITY, OK 73102 Date: Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultze Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #_ noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the 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: Authorized Signature **Authorized Signature** DISTRICT. Mail to: Past Operator_

New Operator

Side Two

Must Be Filed For All Wells

* Lease Name	PARKER		* Location: 6 32 36W: NW		1-1417-
Well No.	API No. (YR DRLD/PRE '67) 15189202610000	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
23		1250FNL	1250FWL	GAS	ACTIVE
		FSL/FNL	FEUFWL		
		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		
	M	FSL/FNL	FEL/FWL		
	-	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	KAN	RECEIVED SAS CORPORATION COMMISSION
		FSL/FNL	FEL/FWL		JUN 1 8 2013

A separate sheet may be attached if necessary

_ FEL/FWL

_ FEL/FWL

CONSERVATION DIVISION-WICHITA, KS

FSL/FNL _

__FSL/FNL _

^{*} 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.

Select the corresponding form being filed:		Mark Toleran Bolesiae Halls	(((() () () () () () () () (
OPERATOR: License # 5208		Well Location:		
Name: EXXONMOBIL OIL CORPORATION	190/ - Ministrika kalandari sa kanan karan karan kalandari sa kalandar			
Address 1: P. O. BOX 4358		County: Stevens	_ _	
Address 2:		Lease Name: PARKER	Weil #: 2-3	
City: HOUSTON State: TX Zip:	77210 ++ <u>4358</u>	If filing a Form 7-1 for multiple wells on a lease, enter the legal description of		
Contact Person: ADAM SCOTT		the lease below: T032S - R036W: SEC 006 SE4, S2 NE4, SE4 NW4, E2 SW4 (NENE) (NWNE) (NENW) (NWNW) (SWNW) (NWSW) (SWSW)		
Phone: (713 131 185 C/ Fax: (71:	•			
Email Address: adam.e.scott@exxonmobil.com				
Surface Owner Information:			***************************************	
Name: 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 county, and in the real estate property tax records of the county treasurer.		
Address 1:	-			
Address 2:	мфит жүмдүй функтинундар оргунунун үчү колдон оргун жайтын менен айманын урганизун оргун айманы			
City: State: Zip:	+			
the KCC with a plat showing the predicted local are preliminary non-binding estimates. The local Select one of the following:				
I certify that, pursuant to the Kansas Sowner(s) of the land upon which the st CP-1 that I am filing in connection with form; and 3) my operator name, address	ibject well is or will be loca this form; 2) if the form bei	ated: 1) a copy of the Form C-1, F ing filed is a Form C-1 or Form CB	orm CB-1, Form T-1, or Form	
I have not provided this information to ti KCC will be required to send this informatisk, I acknowledge that I am being characters.	nation to the surface owne	er(s). To mitigate the additional co	st of the KCC performing this	
If choosing the second option, submit payment form and the associated Form C-1, Form CB-1,			eceived with this form, the KSONA-1	
I hereby certify that the statements made herei	n are true and correct to th	e best of my knowledge and belief	i.	
Date: 6/15/2013 Signature of Operator	or Agent:	MéNulty Tille: _	Regional Land Manager	
API#:15189202610000	KDOR #208318		RECEIVED KANSAS CORPORATION COMMISSION	

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

CONSERVATION DIVISION WICHITA, KS

JUN 1 8 2013

Surface Owners

City:

API#: 15189202610000 Lease Name: **PARKER** Owner Name: BROWER, JOHN L & DONNA M Address: 1545 ROAD X City: MOSCOW State: KS Zip: 67952-5249 **Owner Name:** Address: City: State: Zip: Owner Name: Address: City: State: Zip: **Owner Name:** Address: City: State: Zip: Owner Name: Address:

State:

Zip:

RECEIVED KANSAS CORPORATION COMMISSION

Well #: _2-3

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS