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,

Check Applicable Boxes:	teo wan 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.: 204023
Gas Gathering System:	Lease Name: TOOLE
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.:	T033S - R037W: SEC 013 All
Entire Project: Yes No	
Number of Injection Wells **	County: Stevens
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
** Side Two Must Be Completed.	
	Injection Zone(s):
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. If Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover OR Drilling
	OP Demi
Past Operator's License No	Contact Person: LAURIE KILBRIDE
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 KCC WICHITA
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	JUN 10 ZUIS
1109:	Signature: <u>Andrew D. Cole</u> RECEIVED
	(122.112)
New Operator's License No	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
OLI AUGUS GURY OU TAAGA	05/04/0040
OKLAHOMA CITY, OK 73102	Outo.
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas <i>Q.</i> Schultze</u>
Acknowledgment of Transfer: The above request for transfer of injection a	has been
noted, approved and duly recorded in the records of the Kansas Corporation C	
Commission records only and does not convey any ownership interest in the a	· · · · · · · · · · · · · · · · · · ·
Continuation records only and does not convey any ownership interest in the a	DOTO BIJOCHOTI MORES) OF PIL POTRIE.
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:	
remit No necommended action:	permitted by No.:
Data	Date
Date:	Date:
	PRODUCTION NOV 0 8 2013 UIC 1 8-13
Mail to: Past Operator New Operato	" " " " " " " " " " " " " " " " " " "

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

Side Two

Must Be Filed For Ali Wells

Lease Name: TOOLE		* Location:_13	Location: 13 33 37W:NE			
Well No.	API No. (YR DRLD/PRE 67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
1	15189000210000	3960FSL	1320FEL	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		<u> </u>	
		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	a saakwa sa ay sho celle 19 ga biro ee waa ka wada dha biro ku iyo wa kella 19 ga bababa ka 1444 a 19 ga bababa	anne singilialis sekkun assambli kirist olim isi satu assambli kirist olim kan satu a	
			FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL				
		FSL/FNL	FEL/FWL			
			FEL/FWL		KCC WICHIT	
		FSL/FNL			JUN 1 8 2013	
		ESLIENI	EEL/EWI		RECEIVED	

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.

Select the corresponding form being file	ed: C-1 (Intent) CB-1 (Cathodic Protection Bo	rehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 5208	Well Location:	
Name: EXXONMOBIL OIL CORPORATIO	N	_NE Sec. 13 Twp.33 S. R. 37 Eas X West
Address 1: P. O. BOX 4358	County: Steve	ns
Address 2:	Lease Name:	TOOLE Well #: 1
City: HOUSTON State: TX	7ip: 77210 + 4358 If filling a Form	1.1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT		w: W: SEC 013 All
Phone: { 713 431- 1859 Fax: (713 431-1475	W. 5EC 013 All
Email Address: adam.e.scott@exxonmob	il.com	
Surface Owner Information:		
Name: See Attached	When filing a f	orm 1-1 involving multiple surface owners, attach an additional
Address 1:		for the information to the left for each surface owner. Surface ion can be found in the records of the register of deeds for the
Address 2:		the real estate property tax records of the county freasurer.
City: State:	Zip:+	
are preliminary non-binding estimates. The Select one of the following:	ne locations may be entered on the Form C-1 pl	at, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which I 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	on to the surface owner(s). I acknowledge that, information to the surface owner(s). To mitiga ing charged a \$30.00 handling fee, payable to t	because I have not provided this information, the ite the additional cost of the KCC performing this ne 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	n. If the fee is not received with this form, the KSONA-1
I hereby certify that the statements made	herein are true and correct to the best of my k	nowledge and belief.
Date: 6/15/2013 Signature of Op	nerator or Agent:	Title: Regional Land Manager
API # :15189000210000	KDOR #204023	KCC WICHITA

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

JUN 18 2013

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Surface Owners

API#:	1518900	0210000	Lease Name: _	TOOL	<u> </u>		 Well #:	1
Owr	ner Name:	HAMLIN, RICKIE	L & JUDITH A TR				er a	
	Address:	1684 ROAD P						
	City:	HUGOTON	State:	KS	Zip:	67951-5146		
Ow	ner Name: Address:							
	City:		State:		Zip:			
Owi	ner Name: Address:		1					
	City:		State:		Zip:			
Owr	ner Name:							
	Address: City:		State:		Zip:			
Owi	ner Name: Address:							
	City:		State:		Zip:			

KCC WICHITA
JUN 18 2013
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