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 submit	ged with this form.	
Check Applicable Boxes:	Effective Date of Transfer: 7/1/2013	
X Gas Lease: No. of Gas Wells	Effective Date of Iranster: KS Dept of Revenue Lease No.: 203340	
Gas Gathering System:		
Saltwater Disposal Well - Permit No.:	Lease Name: ROY	33W () - ()
Spot Location: feet from N / S Line	NiN Sec. 18 Twp. 28 R	PE XIM
spot Location:teet from E / W Line	Legal Description of Lease:	
Enhanced Recovery Project Permit No.:	T028S - R033W: SEC 018 NW4, NE4, SE4, SW4	
Entire Project: Yes No	- Hookali	
	County: Haskell	
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE	**************************************
" Side Two Must Be Completed.	Injection Zone(s):	
	leet from N / S Line of	Section
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)		
·		Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Of Drilling	
Past Operator's License No. 5208 /	Contact Person: LAURIE KILBRIDE	
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: _713-431-1182	
	0612412042	CC WICHIT
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date:	,
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: <u>Andrew D. Cole</u>	JUN 1 8 2013
		RECEIVED
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	
	0510410049	
OKLAHOMA CITY, OK 73102	Valle.	
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u>	
Acknowledgment of Transfer: The above request for transfer of injection	a authorization, surface nit nermit #	has been
noted, approved and duly recorded in the records of the Kansas Corporatio		Kansas Corporation
		, , , , , , , , , , , , , , , , , , ,
Commission records only and does not convey any ownership interest in the	and a special months of the position	
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 conta	mud no enero be
Permit No.: Recommended action:	permitted by No.:	
Date:	Date:	ioneture
~/1/2		(-3-13
DISTRICT EFF	THOUSE THE STATE OF THE STATE O	(3)
Mail to: Past Operator New Oper	ARDT UIRATUL	

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

Side Two

Must Be Filed For All Wells

KDOR Lease No.: _	203340	V	
Lease Name:	ROY		* Location: 18 28 33WNW

* Lease Name:	ROY		Location:		
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15081002230000 ✓	2640FSL	2640FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		roi mid	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		JUN 1 8 2013
	***	FSL/FNL	FEL/FWL	· · · · · · · · · · · · · · · · · · ·	RECEIVED
		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/FNU	FEL/FWL		

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	NW Sec.18 Twp.28 S. R.33 Eas X West
Address 1: P. O. BOX 4358	County: <u>Haskell</u>
Address 2:	Lease Name: ROY Well #: 1
City: HOUSTON State: TX Zip: 77210 + 435	8
Contact Person: ADAM SCOTT	the lease below: T028S - R033W: SEC 018 NW4, NE4, SE4, SW4
Phone: (713 431-1859 Fax: (713 431-1475	
Email Address: adam.e.scott@exxonmobil.com	
Surface Owner Information:	
Name: See Attached	ENDAL REBOY OF USE MENTANTIAL BY THE ICH OF CROSS SWICKS STATES
Address 1:	owner information can be found in the records of the register of deeds for the
Address 2:	county, and in the real estate property tax records of the county treasurer.
City: State: Zip:+	
	l (Cathodic Protection Borehole Intent), you must supply the surface owners and ads, tank batteries, pipelines, and electrical lines. The locations shown on the plat ntered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
the KCC with a plat showing the predicted locations of lease rot are preliminary non-binding estimates. The locations may be electrone of the following: X I certify that, pursuant to the Kansas Surface Owner I	Notice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form the form being filled is a Form C-1 or Form CB-1, the plat(s) required by this
the KCC with a plat showing the predicted locations of lease rot are preliminary non-binding estimates. The locations may be en Select one of the following: Certify that, pursuant to the Kansas Surface Owner (s) of the land upon which the subject well is or CP-1 that I am filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number I have not provided this information to the surface owner in the surface owner in the surface of the surface of the surface of the surface owner in the sur	Notice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form the form being filled is a Form C-1 or Form CB-1, the plat(s) required by this
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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Surface Owners

AP#: 15081002230000	Lease Name: _	ROY		Well #: _1	
Owner Name: COX LAND	•				
Address: 1111 RD 90	1				
City: SUBLETTE	State:	KS	Zip: 67877		
Owner Name:					
Address:					
City:	State:	!	Zip:		
•					
Owner Name:					
Address:					
City:	State	:	Zip:		
Owner Name: Address:					
					
City:	State	:	Zip:		
Owner Name: Address:					
	.				
City:	State):	Zip:		

ROY

KCC WICHITA JUN 18 2013 RECEIVED

_____ Well #: _1____