



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS MANAGEMENT

**OIL AND GAS OPERATOR
OWNERSHIP AND CONTROL INFORMATION**

PLEASE TYPE OR PRINT

GENERAL OPERATOR INFORMATION		Enter the name and address under which you or your organization operate oil and gas wells in Pennsylvania which must be the same name as is providing the bond.			
Corporate, Company, Partnership or Registered Fictitious Name XTO Energy Inc.			Type of Organization / Code NPACO		Federal Tax ID# 75-2347769
Individual or Partner - Last Name		First Name		MI	Suffix
Mailing Address 22777 Springwoods Village Parkway					<input type="checkbox"/> Check if this is a new address.
City Spring		State TX	ZIP+4 77389	Country (If Other Than USA)	
Phone (Daytime) 832.624.1978		Ext.	FAX	Email Address gibson_laborde@xtoenergy.com	
Person to Contact - Last Name Laborde		First Name Gibson		MI T	Suffix Assistant Secretary
<p>If the applicant is an individual or partnership operating under a name that is different than your full personal name, the name must be registered as a fictitious name with the Department of State. Please attach a copy of your APPROVED fictitious name registration. <input type="checkbox"/> Registration attached <input type="checkbox"/> Registration previously submitted and still active.</p>					
<p>If the applicant is a domestic or foreign corporation or limited liability company, it must be registered to conduct business in Pennsylvania with the Department of State. Please attach a copy of your APPROVED corporate registration or authorization to conduct business in Pennsylvania.</p> <p><input type="checkbox"/> Registration attached <input type="checkbox"/> Authorization to conduct business in PA attached <input checked="" type="checkbox"/> Registration previously submitted still active</p>					
<p>If the applicant has NO parent company, check the following box.</p> <p><input type="checkbox"/> No parent.</p> <p>If the applicant has a parent company, include the following information for the parent company: the name of the company, its address, phone number, taxpayer ID No., and state of incorporation, if the company is a corporation.</p> <p>Name <u>Exxon Mobil Corporation</u> Phone No. <u>(972) 444-1000</u></p> <p>Address <u>5959 Las Colinas Blvd</u> Taxpayer ID No. <u>1345409005</u></p> <p><u>Irving, Texas 75039</u> If corporation, state of incorporation <u>New Jersey</u></p>					

If the applicant has **NO** subsidiaries, indicate by checking the following box.

☐ **No subsidiary.**

If the applicant has **one or more subsidiaries**, include the following information for each subsidiary company: the name of the company, its address, phone number, taxpayer ID No., and state of incorporation, if the company is a corporation.

Name <u>Ardmore Gathering, LLC</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>35-2419121</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Delaware</u>
Name <u>Barnett Gathering, LLC</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>75-2347769</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Texas</u>
Name <u>Cross Timbers Energy Services, Inc.</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>71-0638043</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Texas</u>
Name <u>Ellora Energy, Inc.</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>01-0717160</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Delaware</u>
Name <u>English Bay Pipeline, LLC</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>71-0892493</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Texas</u>

(Attach additional sheet, in the same format, if necessary.)

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☐ **No subsidiary.**

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Name <u>Fayetteville Gathering Company</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>26-2981361</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Arkansas</u>
Name <u>HHE Energy Company</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>75-1460494</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Delaware</u>
Name <u>HPC Acquisition Corporation</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>26-2766093</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Delaware</u>
Name <u>HPT Land Company</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>75-2146255</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Delaware</u>
Name <u>Mountain Gathering, LLC</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>26-2938747</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Delaware</u>

(Attach additional sheet, in the same format, if necessary.)

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☐ No subsidiary.

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Name <u>Nesson Gathering System</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>20-8834001</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Delaware</u>
Name <u>Phillips Drilling Company</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>20-5091683</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Pennsylvania</u>
Name <u>Phillips Exploration, Inc.</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>25-1407593</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Pennsylvania</u>
Name <u>Phillips Resources, Inc.</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>25-1290216</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Pennsylvania</u>
Name <u>Ringwood Gathering Company</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>73-0738848</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Delaware</u>

(Attach additional sheet, in the same format, if necessary.)

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☐ **No subsidiary.**

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Name _____	Phone No. _____
Address _____	Taxpayer ID No. _____
_____	If corporation, state of incorporation _____
Name <u>Timberland Gathering & Processing Company, Inc.</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>75-2604105</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Texas</u>
Name <u>Trend Gathering & Treating, LLC</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>75-2347769</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Texas</u>
Name <u>TWP, Inc.</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>25-0725360</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Pennsylvania</u>
Name <u>WTW Properties, Inc.</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>75-2579542</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Texas</u>

(Attach additional sheet, in the same format, if necessary.)

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Name <u>XH, LLC</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>75-2347769</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Delaware</u>
Name <u>XTO Netherlands, Ltd.</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>75-1889426</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Delaware</u>
Name <u>XTO Offshore, Inc.</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>74-1664015</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>Delaware</u>
Name <u>XTO UK, Ltd.</u>	Phone No. <u>(817) 870-2800</u>
Address <u>810 Houston Street</u>	Taxpayer ID No. <u>98-0472335(US) 6801480725319(UK)</u>
<u>Ft. Worth, TX 76102</u>	If corporation, state of incorporation <u>United Kingdom</u>
Name _____	Phone No. _____
Address _____	Taxpayer ID No. _____
_____	If corporation, state of incorporation _____

(Attach additional sheet, in the same format, if necessary.)

SIGNATURES

Under penalty of law, the undersigned hereby certify that they have the authority to submit this application on behalf of the applicant, that they have reviewed the information contained in this application and certify that the information is true and correct to the best of their knowledge and belief.

XTO ENERGY INC.

(Print Name of Applicant)

Gibson T. Laborde, Assistant Secretary

(Print Name & Title of Signatory)

Date

6/29/18

(Signature)



Please call 717-772-2199 with any questions.