

RECEIVED AUG 20 2014 KCC WICHITA

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 1-1
Merch 2010
Form must be Typed
Form must be Signed

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:	Effective Date of Transfer: 8/15/2014
Oil Lease: No. of Oil Welis** Gas Lease: No. of Gas Wells***	
	KS Debt of Revenue Lease No.:
Gas Gathering System:	Lease Name: CRAWFORD
Saltwater Disposal Well - Permit No.:	<u>NW</u> Sec. 8 Twp. 33 R. 35W EXW
Spot Location: feet from N / S Line feet from E / W Line	Legal Description of Lease:
	T033S - R035W: SEC 007 All
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	Stayone
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.: (API No. If Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover Drilling
Past Operator's License No. 32864 /	Contact Person: BRENDA WALLER
	Phone: 405-319-3259
Past Operator's Name & Address: XTO ENERGY INC. 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102	00/45/0044
	Date: 08/15/2014 Tim Welch
Title: Vice President-Land	Signature:
New Operator's License No. 33999	Contact Person: NANCY FITZWATER
New Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4000
	Oil / Gas Purchaser: ONEOK FIELD SERVICES
600 Travis Street, Suite 5100 Houston, TX 77002	
	Date: 08/15/2014
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titywator
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation
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 pi
Permit No.: Recommended action:	permitted by No.:
Date	Date:
Date:	Authorized Signature
DISTRICT EPR /0-3-14	PRODUCTION
Mail to: Past Operator New Operat	or District

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Side Two

Must Be Filed For All Wells

* Lease Name	CRAWFORD	<u> </u>	* Location: 8 33 35WNW					
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fi	Footage from Section Line Type of Well (i.e. FSL = Feet from South Line) (Oil/Gas/INJ/WSW)					
1	15189003310000	2970FSL′	2970FEL ~	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					
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		FSL/FNL	FEL/FWL					
		FSL/FNL	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.

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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: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent)				
OPERATOR: License #	Well Location:				
Name: XTO ENERGY INC.					
Address 1: 210 PARK AVENUE, SUITE 2350	County:Stevens				
Address 2:	Lease Name: Well #:1				
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of				
Contact Person: BRENDA WALLER	the lease below: T033S - R035W: SEC 007 All				
Phone: (405 319-3259 Fax: ()					
Email Address: BRENDA_WALLER@XTOENERGY.COM					
Surface Owner Information:	ti la da a sur a Mark en additional				
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				
Address 1:	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 2:	county, and in the real estate property tax records of the obtains a second				
City:					
who was with a plat chausing the predicted locations of lease made tall	odic Protection Borehole Intent), you must supply the surface owners and on the k batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.				
I certify that, pursuant to the Kansas Surface Owner Notice	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.				
I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling.	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this g fee, payable to the KCC, which is enclosed with this form.				
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CF	g fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.				
I hereby certify that the statements made herein are true and correct	to the best of my knowledge and belief.				
Date: Signature of Operator or Agent: Web	Title: Vice President-Land				
API # :15189003310000 KDOR #200749					

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Surface Owners

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API#: 151890033100	00 Lease Name: CRAWFOR	RD	Well # 1
API#. 10100000100			
Owner Name: CRAW	FORD, SHANNON V & DIANA M		
Address: 707 S F	POLK		
City: HUGO	TON State: KS	Zip: 67951-2245	
Owner Name:			
Address:			
City:	State:	Zip:	
Owner Name:			
Address:			
City:	State:	Zip:	
City.		·	
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Owner Name:			
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Owner Name:			
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Owner Name:			
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Well # <u>1</u>_____

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