RECEIVED AUG 20 2014 KCC WICHITA

## 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 submitted with this form. Check Applicable Boxes: 8/15/2014 Oil Lease: No. of Oil Wells \_\_\_\_ Effective Date of Transfer: Gas Lease: No. of Gas Wells \_\_\_\_\_ KS Dept of Revenue Lease No .: \_ Gas Gathering System:\_ Lease Name: DUDLEY Saltwater Disposal Well - Permit No.: \_\_\_ 32 R. \_ 1 \_Twp. \_ Spot Location: \_\_\_\_\_\_ feet from N / S Line Legal Description of Lease: feet from E / W Line T032S - R036W: SEC 001 S2, S2 NE4, S2 NW4 (NENE) (NWNE) Enhanced Recovery Project Permit No.: (NENW) (NWNW) Entire Project: Yes No Number of Injection Wells\_ County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s):\_ \*\* Side Two Must Be Completed. Injection Zone(s): N / S Line of Section Surface Pit Permit No.: \_ feet from (API No. if Drift Pit, WO or Haul) feel from W Line of Section Workover Type of Pit: Emergency Burn Settling Haul-Off Drilling KH **BRENDA WALLER** Past Operator's License No. \_\_32864 Contact Person: \_\_ Past Operator's Name & Address: XTO ENERGY INC. Phone: 405-319-3259 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102 08/15/2014 Tim Welch Vice President-Land Signature: New Operator's License No. 33999 NANCY FITZWATER Contact Person: \_ New Operator's Name & Address: LINN OPERATING, INC. 281-840-4000 Phone: 600 Travis Street, Suite 5100 Houston, TX 77002 Oil / Gas Purchaser: ONEOK FIELD SERVICES 08/15/2014 Date: Title: REGULATORY COMPLIANCE SUPERVISOR 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 permitted by No.: \_\_\_\_ Date: Authorized Signature Authorized Signature \_\_\_ UIC OCT 0 6 2014 PRODUCTION ACT DISTRICT \_\_ Mail to: Past Operator \_\_\_ New Operator



#### Side Two

#### Must Be Filed For All Wells

* Lease Name	DUDLEY		Location: 1 32 36WNW			
Well No.	API No. (YR DRLD/PRE '67)		Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/Ta'D/Abandoned)	
13 INF	15189220410000	4707 FS L 600FNL	2735 FEL 2500FWL	н	ACTIVE	
			EEL/EWI			
			20			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	( <del>)                                    </del>		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		( <del>)</del>	
		FSL/FNL	FEL/FWL			
7		FSL/FNL	FEL/FWL			
	S	FSL/FNL	FEL/FWL			
	8	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	8	FSL/FNL	FEL/FWL			
	s	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL .			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
<del></del> 0		FSL/FNL	FEL/FWL .			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			

A separate sheet may be attached if necessary

<sup>\*</sup> 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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API#:15189220410000

#### 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.

	-1 (Cathodic Protection Borehole Intent) [X] T-1 (Tran	nsfer) CP-1 (Plugging Application)		
OPERATOR: License # 32864  Name: XTO ENERGY INC.		2 S. R. <sup>36</sup> Easi West		
Address 1: 210 PARK AVENUE, SUITE 2350 Address 2:	County: Stevens	A A DIE		
		Well #:13 INF		
City: OKLAHOMA CITY State: OK Zip: 73102 +		If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person: BRENDA WALLER	T032S - R036W: SEC 001 S2, S2 NE4, S2 NW4 (NENE) (NWNE) (NENW) (NWNW)			
Phone: ( 405 319-3259 Fax: ( )				
Email Address: BRENDA_WALLER@XTOENERGY.COM	<del>.</del>			
Surface Owner Information:				
Name: See Attached		When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1:	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 2:				
City: State: Zip:+	_			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cati the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered Select one of the following:  X I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filling in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,  I have not provided this information to the surface owner(s). I	Act (House Bill 2032), I have provided the located: 1) a copy of the Form C-1, Form n being filed is a Form C-1 or Form CB-1, t and email address.	The locations shown on the plat separate plat may be submitted.  e following to the surface CB-1, Form T-1, or Form he plat(s) required by this		
the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered Select one of the following:  X I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filling in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,  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.	Act (House Bill 2032), I have provided the located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form n being filed is a Form C-1 or Form CB-1, the and email address.  acknowledge that, because I have not provided the control of the form CB-1, the additional cost of the form CB-1, the additional cost of the fee, payable to the KCC, which is enclosed.	The locations shown on the plat separate plat may be submitted.  e following to the surface CB-1, Form T-1, or Form he plat(s) required by this  vided this information, the fithe KCC performing this ed with this form.		
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KDOR #220953

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### Surface Owners

API#: 151892	220410000	Lease Name: DUDLEY		Well # <u>13 INF</u>				
Owner Name:	MOSS FARM LLC							
Address:	147301 CALIBER DR							
City:	OKLAHOMA CITY	State: OK	Zip: 73134					
Owner Name:								
Address:								
City:		State:	Zip:					
Owner Name:								
Address:								
City:		State:	Zip:					
Owner Name:								
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