### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 7-1 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 207364 KS Dept of Revenue Lease No.: \_ Gas Gathering System: Lease Name: E A LOOMIS Saltwater Disposal Well - Permit No.: \_\_\_ W2\_Sec. \_ 25 Twp. 31 feet from N/S Line Legal Description of Lease: feet from E / W Line T031S - R036W: SEC 025 All Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells\_ County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE **COUNCIL GROVE** Production Zone(s): \*\* Side Two Must Be Completed. Injection Zone(s): Surface Pit Permit No .: \_ S Line of Section feet from (API No. If Drill Pit, WO or Haul) W Line of Section feet from KH Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling 32864 **BRENDA WALLER** Past Operator's License No. 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 Date: Tim Welch Title: 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 Oil / Gas Purchaser: WGP-KHC LLC 600 Travis Street, Suite 5100 Houston, TX 77002 08/15/2014 Date:\_ Title: REGULATORY COMPLIANCE SUPERVISOR Signature: 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 . Recommended action: permitted by No.: \_ Date: Authorized Signature Authorized Signature 0 6 2014 DISTRICT. PRODUCTION ...

**New Operator** 

Mail to: Past Operator\_

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease N							
* Lease Name:	E A LOOMIS	* Location: 25 31 36WW2					
Well No.	API No. (YR DRLD/PRE 67)	Footage from (i.e. FSL = Feet fr	Section Line rom South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)		
2 1	5189204850000 /	2850FSL	3996FEL	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				
		FSL/FNL	FEL/FWL				
	<u>Bolindar Tiplie</u>	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.

API #:15189204850000

## 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 # 32864  Name: XTO ENERGY INC.  Address 1: 210 PARK AVENUE, SUITE 2350	Well Location:			
Address 2:  City: OKLAHOMA CITY State: OK Zip: 73102 +  Contact Person: BRENDA WALLER  Phone: ( 405 319-3259 Fax: ( )  Email Address: BRENDA_WALLER@XTOENERGY.COM	Lease Name: E A LOOMIS Well #:2  If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:  T031S - R036W: SEC 025 All			
Surface Owner Information:         Name:       See Attached         Address 1:	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 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.			
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered or Select one of the following:  X I certify that, pursuant to the Kansas Surface Owner Notice A	dic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  ct (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			
CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, as	cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this			
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 CP-1	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.			
I hereby certify that the statements made herein are true and correct to  Date: Signature of Operator or Agent: Time OValch				

KDOR #207364

### **Surface Owners**

API#: 151892	204850000	Lease Name: <u>E A LOOMIS</u>		Well # <u>2</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:					
Address:					
City:		State:	Zip:		
Owner Name:					
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