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 207312 KS Dept of Revenue Lease No.: _ Gas Gathering System: Lease Name: _ E S BOASE Saltwater Disposal Well - Permit No.: ___ 31 _Twp. _ _____feet from N / S Line Legal Description of Lease: feet from E / W Line T026S - R035W: SEC 031 All Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells_ County: Kearny Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): COUNCIL GROVE ** Side Two Must Be Completed. Injection Zone(s): feet from N / S Line of Section Surface Pit Permit No .: _ (API No. If Drill Pit, WO or Haul) E / W Line of Section feet from Drilling Type of Pit: Emergency Burn Settling Haul-Off Workover KA **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 Date: _ 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: WGP-KHC LLC 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 ___ . Recommended action: _ permitted by No.: _ Permit No.: _ Date: Authorized Signature Authorized Signature INDCT 0 6 2014 DISTRICT _ Mail to: Past Operator_ **New Operator** District

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Side Two

Must Be Filed For All Wells

KDOR Lease						
Lease Name:	E S BOASE		* Location: 3*	1 26 35WNW		
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
2	15093206040000	2920FSL	2920FEL	GAS	ACTIVE	
		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	· · · · · · · · · · · · · · · · · · ·		
<u> </u>		FSL/FNL	FEL/FWL	. 		
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	1.1 建氯基		

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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API #:15093206040000

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 (Ca	athodic Protection Borehole Intent)			
OPERATOR: License #32864 Name:XTO ENERGY INC. Address 1:210 PARK AVENUE, SUITE 2350	Well Location:			
Address 2:	Lease Name: E S BOASE Well #:2			
City: OKLAHOMA CITY State: OK Zip: 73102 + Contact Person: BRENDA WALLER	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: T026S - R035W: SEC 031 AII			
Phone: (405 319-3259 Fax: () Email Address: BRENDA_WALLER@XTOENERGY.COM				
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.			
Address 2: City:	county, and in the real estate property tax records of the county if easurer.			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodi the KCC with a plat showing the predicted locations of lease roads, tank to are preliminary non-binding estimates. The locations may be entered on Select one of the following: X Certify that, pursuant to the Kansas Surface Owner Notice Act	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ping filed is a Form C-1 or Form CB-1, the plat(s) required by this			
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling for	er(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				
I hereby certify that the statements made herein are true and correct to the	he best of my knowledge and belief.			
Date: Signature of Operator or Agent:	Title:Title:			

KDOR #207312

Surface Owners

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API#: <u>15093206040000</u>		Lease Name: <u>ESBOASE</u>	Well # <u>2</u>	Well # <u>2</u>	
Owner Name:	MEYER, MARK E				
Address:	46376 COUNTY RD 5	53			
City:	BENNETT	State: CO	Zip: 80102		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
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Owner Name:					
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Owner Name:					
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