KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 July 2014 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: Oil Lease: No. of Oil Wells Effective Date of Transfer: 08/15/2014 Gas Lease: No. of Gas Wells 1 KS Dept of Revenue Lease No.: 203955 Gas Gathering System: Lease Name: TURNER 'A' Saltwater Disposal Well - Permit No.: ___ ____ feet from N / S Line Legal Description of Lease: T024S-R038W; SEC 028 __ feet from __ E / __ W Line Enhanced Recovery Project Permit No .: __ Received KANSAS CORPORATION COMMISSION Entire Project: Yes No County: KEARNY 2 2 2014 Number of Injection Wells __ Production Zone(s): CHASE Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CONSERVATION DIVISION Injection Zone(s):_ WICHITA KS ** Side Two Must Be Completed. Surface Pit Permit No.: _ feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover 32864 / Past Operator's License No. **BRENDA WALLER** Contact Person: Past Operator's Name & Address: XTO ENERGY, INC Phone: 405-319-3259 210 PARK AVENUE, SUITE 2350, OKC, OK 73102 08/15/2014 Date: . Title: VICE PRESIDENT, LAND Tim Welch Signature: New Operator's License No. 33999 / Contact Person: NANCY FITZWATER New Operator's Name & Address: LINN OPERATING, INC Phone: 281-840-4000 600 TRAVIS STREET, SUITE 5100, HOUSTON, TX 77002 WGP-KHC-LLC Oil / Gas Purchaser: Date: _08/15/2014 REGULATORY COMPLIANCE SUPERVISOR Nancy Fitzwater 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 UICSEP 3 0 2014 DISTRICT _ Mail to: Past Operator _ New Operator _ District _

Side Two

Must Be Filed For All Wells

KDOR Lease	No.:203955				
* Lease Name:	TURNER 'A'		* Location:2	28-24S-38W	
Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet fro		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
1 A-28	1509330059 /	Circle	Circle 2740 FAIL PED FWL	GAS	PRODUCING
		FSL/FNL	FEL/FWL		_
S		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL	KANSAS COP	Received PORATION COMMISSION
		FSL/FNL	FEL/FWL		
			FEL/FWL	CONSER	VATION DIVISION
		FSL/FNL	FEL/FWL	VV	CHITA, KS

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.

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

Form KSONA-1 July 2014 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.

20001	
OPERATOR: License # 32864	Well Location:
Name: XTO ENERGY, INC.	SENENW_Sec. 28 Twp. 24S_S. R. 38 East X Wes
Name: XTO ENERGY, INC. Address 1: 210 PARK AVENUE, SUITE 2350	County: KEARNY Lease Name: TURNER 'A' Well #, 1
Address 2:	Lease Name: TURNER 'A' 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
Contact Person: BRENDA WALLER Phone: (405) 319-3259 Fax: ()	the lease below:
Phone: (405) 319-3259 Fax: ()	T024S-R038W: SEC 28
Email Address: BRENDA_WALLER@XTOENERGY.COM	
Surface Owner Information:	
Name: ENGLERT INVESTMENT COMPANY, LP	When filing a Form T-1 involving multiple surface owners, attach an additiona
Name: ENGLERT INVESTMENT COMPANY, LP Address 1: P.O. BOX 494 Address 2:	sheet listing all of the information to the left for each surface owner. Surface
Address 2:	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.
City: SYRACUSE State: KS Zip: 67878 +	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat
State: KS Zip: 67878 +	
State: KS Zip: 67878 +	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Ce Act (House Bill 2032), I have provided the following to the surface be 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
State: KS Zip: 67878 +	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. CE Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address. I acknowledge that, because I have not provided this information, the electric owner(s). To mitigate the additional cost of the KCC performing this ress of the surface owner by filling out the top section of this form and
State: KS Zip: 67878 +	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Ce Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address. I acknowledge that, because I have not provided this information, the electric owner(s). To mitigate the additional cost of the KCC performing this ress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.
State: KS Zip: 67878 +	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The located plat may be submitted. The locations shown on the surface be located plat may be surface be located: The locations shown on the surface be located: The locations shown on the surface be surface be located: The locations shown on the surface be surface be located: The locations shown on the surface be surface be located: The locations shown on the surface be surface owner on the plat (s) required by this information, the electric work of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. The locations shown on the plat may be surface owners and plat may be surface.

Received KANSAS CORPORATION COMMISSION

SEP 2 2 2014