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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 201595 💉 KS Dept of Revenue Lease No .: . Gas Gathering System: Lease Name: A W HUNT Saltwater Disposal Well - Permit No.:___ feet from N/S Line Legal Description of Lease: feet from E / W Line T027S - R036W: SEC 031 All Enhanced Recovery Project Permit No.: _ Entire Project: Yes No Number of Injection Wells_ County: Grant Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s): ** Side Two Must Be Completed. Injection Zone(s): Surface Pit Permit No .: _ S Line of Section feet from N / (API No. If Drill Pit, WO or Haul) W Line of Section feet from 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 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 permitted by No.: _ Date: Authorized Signature Authorized Signature OCT 2 9 2014 DISTRICT _ Mail to: Past Operator ___ New Operator District

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Side Two

Must Be Filed For All Wells

KDOR Lease			and the second			
* Lease Name:	A W HUNT			* Location: 3'	1 27 36WSE	
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	
<u>.</u> 1	15067002660000		2310 F5L 1980FSL	2310FEL	GAS	ACTIVE
			FSL/FNL	FEL/FWL		
in i			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
		. 11 	FSL/FNL	FEL/FWL		
		 - :	FSL/FNL	FEL/FWL		
		· · · · · ·	FSL/FNL	FEL/FWL		
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		<u> </u>	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		

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 #:15067002660000

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) X T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #32864	Well Location:			
Name: XTO ENERGY INC.	SE _ Sec. 31 _Twp. 27 _ S. R. 36East			
Address 1: 210 PARK AVENUE, SUITE 2350	County: Grant			
Address 2:	Lease Name: A W HUNT 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 the lease below: T027S - R036W: SEC 031 All			
Contact Person: BRENDA WALLER				
Phone: (405 319-3259 Fax: ()				
Email Address: BRENDA_WALLER@XTOENERGY.COM				
Surface Owner Information:				
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 owner information can be found in the records of the register of deeds for the			
Address 1:				
Address 2: State: Zip: +	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	dic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat			
Select one of the following:	n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
	ocated: 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			
I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface ownersk, I acknowledge that I am being charged a \$30.00 handling	icknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this 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 CP-	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: 8/15/2014 Signature of Operator or Agent: Tim Welch	Title: Vice President-Land			

KDOR #201595

Surface Owners

API#: <u>15067002660000</u>		Lease Name: A W HUNT	Well # <u>1</u>		
Owner Name:	HUNT, JESSIE ANN	TRUST, ETAL			
Address:	11516 NICHOLAS S	T #100			
City:	ОМАНА	State: NE	Zip: 68154		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
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Owner Name:					
Address:					
City:		State:	Zip:		