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: MUST be submit	tted with this form.				
Oil Lease: No. of Oil Wells***	Effective Date of Transfer: 8/15/2014				
X Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 208383				
Gas Gathering System:	Lease Name: _ALBERT				
Saltwater Disposal Well - Permit No.:					
Spot Location: feet from N / S Line	<u>SW</u> Sec. <u>11 Twp. 33 R. 37W</u>				
feet from E / W Line	Legal Description of Lease:				
Enhanced Recovery Project Permit No.:	T033S - R037W: SEC 011 S2 SEC 012 S2				
Entire Project: Yes No					
Number of Injection Wells**	County: Stevens				
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE				
** Side Two Must Be Completed.	Injection Zone(s):				
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section				
	feet from E / W Line of Section				
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KH				
Past Operator's License No. 32864	Contact Person: BRENDA WALLER				
Past Operator's Name & Address: XTO ENERGY INC.	Phone: _405-319-3259				
210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102	Date: 08/15/2014				
	Tim Wolch				
Title: Vice President-Land	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	Oil / Gas Purchaser: ONEOK FIELD SERVICES				
	Date: 08/15/2014				
Title:REGULATORY COMPLIANCE SUPERVISOR	000 000				
TITLE: REGULATORT COMPLIANCE SUFERVISOR	Signature:				
Acknowledgment of Transfer: The above request for transfer of injection a	그 그 그는 생각 사람들이 가는 하는 사람들이 되었다. 그는 그는 그는 사람들이 모르는 것 같아요.				
noted, approved and duly recorded in the records of the Kansas Corporation C					
Commission records only and does not convey any ownership interest in the a	bove 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				
Permit No.: Recommended action:					
remiting	permitted by No.:				
P-1-					
Date:	Date:				
	RODUCTION NOV 0 5 2014 UIC NOV 0 5 2014				
Mail to: Past Operator New Operator	the contract of the contract o				

Side Two

Must Be Filed For All Wells

KDOR Lease				1 22 2744044	
* Lease Name:	ALBERT	elista en la composición de la composición del composición de la c	* Location: 11	1 33 37WSW	
Well No.	API No. Footage from Section Line (YR DRLD/PRE '67) (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
12	15189203940000	1250FSL	1250FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
<u> </u>		FSL/FNL	FEL/FWL		
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10 to		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL			
		FSL/FNL	FEL/FWL		<u> </u>
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	<u> </u>	FSL/FNL	FEL/FWL		<u> </u>

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.

API#:15189203940000

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.

22064					
OPERATOR: License # 32864	_ Well Location:				
Name: XTO ENERGY INC.	SW Sec. 11 Twp.33 S. R. 37 East West				
Address 1: 210 PARK AVENUE, SUITE 2350					
Address 2:	Lease Name: ALBERT Well #:1-2				
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of				
Contact Person: BRENDA WALLER	the lease below: T033S - R037W: SEC 011 S2 SEC 012 S2				
Phone: (405 319-3259 Fax: ()	_				
Email Address: BRENDA_WALLER@XTOENERGY.COM	_				
Surface Owner Information:					
Name: See Attached					
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 				
Address 2:	and the second state of the second se				
	thodic Protection Borehole Intent), you must supply the surface owners and				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cat the KCC with a plat showing the predicted locations of lease roads, to					
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cat 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 certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	thodic Protection Borehole Intent), you must supply the surface owners and each batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this				
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Surface Owners

API#: <u>151892</u>	203940000	Lease Name: ALBERT		Well # <u>12</u>	_
Owner Name:	PEACHEY, PAM ETA	AL			
Address:	1601 S MONROE				
City:	HUGOTON	State: KS	Zip: 67951		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		