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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 1-1 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,
MIST he submitted with this form

Check Applicable Boxes:	area with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 8/15/2014
X Gas Lease: No. of Gas Wells 1	KS Dept of Revenue Lease No.: 221028
Gas Gathering System:	Lease Name: _BECKER
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from DE / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T030S - R033W: SEC 002 SE4, N2, SW4
Entire Project: Yes No	
Number of Injection Wells **	County: Haskell
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off
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
Title: Vice President-Land	Signature: Tim Welch
	Signature:
New Operator's License No33999	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
THE PECHI ATORY COMPLIANCE SUPERVISOR	040 27
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Phymater
Acknowledgment of Transfer: The above request for transfer of injection a	그는 사람들이 가장 하는 것이 되었다면 사람들이 있는 것이 되었다. 그 사람들이 가장 하는 것이 없는 것이 없는 것이 없다.
	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the a	ibove 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:	permitted by No.:
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR	PRODUCTION NOV 0 7 2014 UICNOV 0 7 2014
HOUNDERS - 그는 이번 이 HOUNDERS - 1980 - 1980 - 1980 - 1980 - 1980 - 1980 - 1980 - 1980 - 1980 - 1980 - 1980 - 198	r District

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Side Terr

Must Be Filed For All Wells

KDOR Lease							
* Lease Name: BECKER		Location: 2 30 33WNW					
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)	
23	15081210130000	1250FNL	1250FWL	GAS		ACTIVE	
	user, est pergenting pergenting	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
Principal -		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FELFWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL	***************************************			
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		FSL/FNL	FEL/FWL			;:: 	
		FSL/FNL	FEL/FWL				<u> </u>
	e – John partille e 19 11 – Frank Mark	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		<u>:</u>		
		FSL/FNL	FEL/FWL			·	
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		ita. Maara	- <u> </u>	
		FSL/FNL	FEL/FWL				
		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#:15081210130000

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.

OPERATOR: License # 32864	Well Location:			
Name: XTO ENERGY INC.				
Address 1: 210 PARK AVENUE, SUITE 2350	County: Haskell			
Address 2:	Lease Name: BECKER Well #:23			
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:			
Phone: (405 319-3259 Fax: ()	T030S - R033W: SEC 002 SE4, N2, SW4			
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:				
City: State: Zip:+				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cal	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 are preliminary non-binding estimates. The locations may be entered Select one of the following: X I 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 ank 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			
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KDOR #221028

Surface Owners

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API#: <u>15081</u>	210130000	Lease Name: BECKER		Well # <u>23</u>
				•
Owner Name:	TRIBBEY, JASON M	TRIBBEY, THAD H		
Address:	9711 W 131ST TERR	ACE		
City:	OVERLAND PARK	State: KS	Zip: 66213	
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:	