RECEIVED AUG 20 2014 KCC WICHITA

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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 KS Dept of Revenue Lease No.: Gas Gathering System: Lease Name: BELLWARD Saltwater Disposal Well - Permit No.: \_\_\_ 31 R. \_ \_\_ feet from N / S Line Legal Description of Lease: \_\_\_ feet from F / W Line T031S - R035W: SEC 007 NE4, E2 NW4, E2 SW4, SE4 (NWNW) Enhanced Recovery Project Permit No.: (SWNW) (NWSW) (SWSW) Entire Project: Yes No Number of Injection Wells\_ County: Stevens 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) W Line of Section feet from Type of Pit: Emergency Burn Settling Haul-Off Workover Drillina 24 Past Operator's License No. 32864 **BRENDA WALLER** Contact Person: Phone: 405-319-3259 Past Operator's Name & Address: XTO ENERGY INC. 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102 08/15/2014 Tim Welch Vice President-Land Signature: NANCY FITZWATER New Operator's License No. 33999 / Contact Person: \_\_\_ New Operator's Name & Address: LINN OPERATING, INC. 281-840-4000 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 permitted by No.: \_\_\_ Date: Authorized Signature Authorized Signature PRODUCTION MOV 0 7 2014 DISTRICT -Mail to: Past Operator \_\_\_ **New Operator** 

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#### Side Two

#### Must Be Filed For All Wells

* Lease Name: BELLWARD		Location: 7	31 35WSE		
Well No. API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet fro	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/Ta'D/Abandoned)	
1 15189001560000 /	2310FSL	2310FEL	GAS	ACTIVE	
	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL			
18 - 19 - 19 - 19 - 19 - 19 - 19 - 19 -	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL			
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	FSL/FNL	FEL/FWL			
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	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL			
er e	FSL/FNL	FEL/FWL	<u>, ,                                  </u>		
	FSL/FNL	FEL/FWL			

A separate sheet may be attached if necessary

<sup>\*</sup>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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## 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	Mol Landian			
Name: XTO ENERGY INC.	Well Location:SESec7Twp.31S. R35East West			
Address 1: 210 PARK AVENUE, SUITE 2350				
Address 2:	Lease Name: BELLWARD Well #:1			
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: T031S - R035W: SEC 007 NE4, E2 NW4, E2 SW4, SE4 (NWNW) (SWNW) (NWSW) (SWSW)			
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			
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:	county, and in the real estate property tax records of the county treasurer.			
City: State: Zip:+  If this form is being submitted with a Form C-1 (Intent) or CB-1 (Ca	athodic Protection Borehole Intent), you must supply the surface owners and			
City: State: Zip:+  If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads,				
City: State: Zip: +  If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, 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	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			
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### Surface Owners KCC WICHITA

RECEIVED **AUG 20 2014** 

API#: <u>15189</u> (	001560000	Lease Name: BELLWARD		Well # <u>1</u>
Owner Name:	LAHEY, THOMAS L	LIV TR & PATRICIA ETAL		
Address:	2711 ROAD Z			
City:	MOSCOW	State: KS	Zip: 67952-5246	
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:	