RECEIVED AUG 20 2014 KCC WICHITA

### 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.

Oneck 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.: 219674				
Gas Gathering System:	Lease Name: BOLTON				
Saltwater Disposal Well - Permit No.:					
Spot Location:feet from N / S Line	Legal Description of Lease:				
feet fromE /W Line	T035S - R037W: SEC 008 NE4, NW4, SW4, SE4				
Enhanced Recovery Project Permit No.:					
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.:  (API No. if Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling	feet from N / S Line of Sectionfeet from E / W Line of Section Haul-Off Workover Drilling ∠λ				
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	Tim Welch				
INC:	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	Signature: Nancy Fugurator				
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation				
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 6 2014 UIC NOV 0 6 2014				
Mail to: Past Operator New Operate	or District				

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#### Side Two

#### Must Be Filed For All Wells

* Lease Name:	BOLTON	THE TOTAL CONTRACT OF THE SERVICE STATES OF THE SERVICE STATES.	* Location: 8	35 37WNE			
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)	
14 INF	15189211280002	3973FSL_	2300FEL	. <u>.</u> HI		ACTIVE	
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		· · · · · · · · · · · · · · · · · · ·		
		FSL/FNL	FEL/FWL				in the second
		FSL/FNL	FEL/FWL	·			
		FSL/FNL	FEL/FWL		<u> </u>		
		FSL/FNL	FEL/FWL				
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		FSL/FNL	FEL/FWL				
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		FSL/FNL	FEL/FWL			:	
		FSL/FNL					
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL	<u> </u>			
		FSL/FNL			<u> </u>		
			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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API #:15189211280002

### 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:Stevens					
Address 2:						
City: OKLAHOMA CITY State: OK Zîp: 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:					
Phone: ( 405 319-3259 Fax: ( )	T035S - R037W: SEC 008 NE4, NW4, SW4, SE4					
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:						
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 reads	athodic 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 (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					
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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 I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, factorized will be required to send this information to the surface owner(s).  KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand.  If choosing the second option, submit payment of the \$30.00 hand.	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 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 dling fee, payable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1 CP-1 will be returned.					

KDOR #219674

### **Surface Owners**

RECEIVED **AUG 20 2014** KCC WICHITA

API#: 151892	211280002	Lease Name: BOLTON		Well # <u>14 INF</u>
Owner Name:	GREWELL LAND LI	_c		
Address:	1114 ROAD A			
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:	