RECEIVED AUG 20 2014 KCC WICHITA

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form F1
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: Oil Lease: No. of Oil Wells Effective Date of Transfer: Gas Lease: No. of Gas Wells 207319 KS Dept of Revenue Lease No.: \_\_ Gas Gathering System:. Lease Name: (EOG) CLAIR CURRY Saltwater Disposal Well - Permit No.: \_ NW Sec. \_ feet from N / S Line Legal Description of Lease: feet from E / W Line T026S - R035W: SEC 020 All Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells\_ County: Kearny Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE **COUNCIL GROVE** Production Zone(s): \*\* 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 Drilling KH **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 Tim Welch Vice President-Land Signature: New Operator's License No. -**NANCY FITZWATER** Contact Person: New Operator's Name & Address: LINN OPERATING, INC. 281-840-4000 Phone: 600 Travis Street, Suite 5100 Houston, TX 77002 Oil / Gas Purchaser: WGP-KHC LLC 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 the new operator and may continue to inject fluids as authorized by the new operator of the above named lease containing the surface pit \_\_ . Recommended action: permitted by No.: Authorized Signature Authorized Signature MOV 0 7 2014 DISTRICT \_ Mail to: Past Operator\_

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#### Side Two

#### Must Be Filed For All Wells

* Lease Name: (EOG) CLAIR CURRY		* Location: 29 26 35WNW				
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)	
2 15	5093206080000	2520FNL	2310FWL	GAS	ACTIVE	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	To the Company of the	FSL/FNL	FEL/FWL			
	변기 기본 설립 (1991년) <del>12 - 13 - 13 - 13 - 13 - 13 - 13 - 13 - </del>	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		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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API #:15093206080000

### 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.

22964				
OPERATOR: License # 32864 Name: XTO ENERGY INC.				
Address 1: 210 PARK AVENUE, SUITE 2350	County: Kearny			
Address 2:				
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: T026S - R035W: SEC 020 All			
Phone: (405319-3259	<del>_</del>			
Email Address: SKENDA_WALLELNEXTOCKERST.COM	<del></del>			
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			
Address 2:	owner information can be found in the records of the register of deeds for the 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 (Cthe KCC with a plat showing the predicted locations of lease roads	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.			
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, far	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 the plat is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address.			
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KDOR #207319

API#:15093206080000		Lease Name: <u>(EOG) CLA</u>	Well # 2		
Owner Name: Address:	SMITH, BRYAN K 10450 N RD S				
City:	ULYSSES	State: KS	Zip: 67880		
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:		