## 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.: 208288			
Gas Gathering System	Lease Name: KINSER			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T034S - R036W: SEC 020 NW4, W2 NE4, E2 NE4, SE4, SW4			
Entire Project: Yes No				
Number of Injection Wells ***	County:Stevens			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE  Injection Zone(s):			
** Side Two Must Be Completed.				
	injection zone(o).			
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section			
(API No. II UTIII PII, WO OF HAUI)	feet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KH			
32864				
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			
New Operator's License No. 33999	Contact Person: NANCY FITZWATER			
New Operator's Name & Address: LINN OPERATING, INC.	Phone:			
600 Travis Street, Suite 5100 Houston, TX 77002	Oil / Gas Purchaser: ONEOK FIELD SERVICES			
	Date: 08/15/2014			
TEGUL ATORY COMPLIANCE CUREDWISOR				
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Fuzivator			
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit #has been			
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.			
	<u> </u>			
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 _/ D-27-14	PRODUCTION OCT 2 8 2014 UIC OCT 2 8 2014			
Mail to: Past Operator New Operator	or District			

#### Side Two

#### Must Be Filed For All Wells

Lease Name:	KINSER	^ Location: 20 34 36WNE			
Well No.	API No. (YR DRLD/PRE '67)		Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)
23	15189207560000	3960FSL	1320FEL	GAS	ACTIVE
		FSL/FNL	FEUFWL		
		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		

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.

API#:15189207560000

### 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.

Select the corresponding form being filed: C-1 (Intent)CB-1 (C	othodic Protection Borehole Intent)		
OPERATOR: License # 32864  Name: XTO ENERGY INC.  Address 1: 210 PARK AVENUE, SUITE 2350	Well Location: NE Sec. 20 Twp.34 S. R. 36 East West County; Stevens		
Address 2:	tease Name: KINSER Well #:23		
City: OKLAHOMA CITY State: OK Zip: 73102 + Contact Person: BRENDA WALLER  Phone: ( 405 319-3259 Fax: ( )   Email Address: BRENDA_WALLER@XTOENERGY.COM	It filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: T034S - R036W: SEC 020 NW4, W2 NE4, E2 NE4, SE4, SW4		
Surface Owner Information: Name: See Attached	Milyan filing a Farm T Linychina multipla curtons aumars attach an additional		
Address 1:	When filing a Form T-1 involving multiple surface owners, attach an additional 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:			
CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, an	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  It (House Bill 2032), I have provided the following to the surface cated: 1) a copy of the Form C-1. Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this		
	ner(s). To mitigate the additional cost of the KCC performing this		
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1			
I hereby certify that the statements made herein are true and correct to t	he best of my knowledge and belief.		
Date: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land		

KDOR #208288

### **Surface Owners**

API#: 151892	207560000	Lease Name: KINSER		Well # <u>23</u>
Owner Name:	KINSER, WILBUR J	& JULIANN C		
Address:	1763 ROAD G			
City:	HUGOTON	State: KS	Zip: 67951-5145	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
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Owner Name:				
Address:				
City:		State:	Zip:	