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:	1		
Oil Lease: No. of Oil Wells***	Effective Date of Transfer: 8/15/2014		
Gas Lease: No. of Gas Wells***	KS Dept of Revenue Lease No.: 221865		
Gas Gathering System:	Lease Name: KINSER		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	··· Legengel legitarid		
feet from E / W Line	Legal Description of Lease: T034S - R036W: SEC 020 NW4, W2 NE4, E2 NE4, SE4, SW4		
Enhanced Recovery Project Permit No.:	10343 - 103044. SEG UZU 14444, 442 1464, 62 1464, 6644, 6444		
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)	feet from N / S Line of Sectionfeet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KA		
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:281-840-4000		
600 Travis Street, Suite 5100 Houston, TX 77002	Oil / Gas Purchaser: ONEOK FIELD SERVICES		
	00/45/0044		
Title: _REGULATORY COMPLIANCE SUPERVISOR	Date: U8/15/2014 Signature: Nancy Fitzwater		
Acknowledgment of Transfer: The above request for transfer of injection	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.		
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		
· ·	PRODUCTION OCT 2 8 2014 UIC OCT 2 8 2014		
Mail to: Past Operator New Operat	tor		

Side Two

Must Be Filed For All Wells

* Lease Name	KINSER	* Location: 20 34 36WSE			
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)
25 INF	15189221870001 V	1500FSL	1250FEL	HI	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		APPENDATION OF A SULPANIA OF A
		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		
		EQ. (54)			
.,		-			
		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.

API#:15189221870001

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	(Cathodic Protection Borehole Intent)			
OPERATOR: License # 32864	Well Lecation:			
Name: XTO ENERGY INC.				
Address 1: 210 PARK AVENUE, SUITE 2350	County: Stevens			
Address 2:	Lease Name: KINSER Well #:25 INF			
City: OKLAHOMA CITY State: OK Zip: 73102 +				
Contact Person: BRENDA WALLER	the lease below:			
Phone: (405 319-3259 Fax: ()	T034S - R036W: SEC 020 NW4, W2 NE4, E2 NE4, SE4, SW4			
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			
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:+				
are preliminary non-binding estimates. The locations may be entered. Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this			
task, Lacknowledge that Lam being charged a \$30.00 handling 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 CF	g fee with this form. If the fee is not received with this form, the KSONA-1			
I hereby certify that the statements made herein are true and correct to	to the best of my knowledge and belief.			
Date: Signature of Operator or Agent: Welcome	Title: Vice President-Land			
Olympia of Operation of Agents	PAGE			

KDOR #221865

Surface Owners

API#: 151892	221870001	Lease Name: KINSER		Well # <u>25 INF</u>
Owner Name:	WHEELER INVESTM	IENTS LP		
Address:	2044 ROAD H			
City:	HUGOTON	State: KS	Zip: 67951-5184	
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:	