District ___

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. 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 Gamering System:	Lease Name: KINSER		
Saltwater Disposal Well - Permit No.:	NE Sec. 20 Twp. 34 A. 36W EXW		
Spot Location: feet from N / S Line	Legal Description of Lease:		
feet from E / W Line	T034S - R036W: SEC 020 NW4, W2 NE4, E2 NE4, SE4, SW4		
Enhanced Recovery Project Permit No.:	10345 - 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): CHASE		
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. it Drill Pit, WO or Haul)	feet from		
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	Tim Welch		
Title:	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		
	00/45/0044		
	W(C)		
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Fitzwater		
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 C	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the a	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:	,		
remit No.; Hecommended action:	permitted by No.:		
Data	Date		
Date:	Date:		
DISTRICT EPR 10-27-14 F	PRODUCTION CCT 2 8 2014 UIC OCT 2 8 2014		

New Operator_

Mail to: Past Operator,



Side Two

Must Be Filed For All Wells

KINSER				
NINSER		* Location: 20	34 36WNE	
API No. (YR DRLD/PRE '67)		Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned
15189005620000	2740 BL 2970FSL	2540 FEL. 2 310FEL	GAS	ACTIVE
	FSUFNL	FEL/FWL		
	FSL/FNL	FEL/FWL		
	FSL/FNL	FEL/FWL		
	FSL/FNL	FEL/FWL		
410000000000000000000000000000000000000	FSL/FNL	FEL/FWL		
	FSL/FNL	FEUFWL		
	FSL/FNL	FEL/FWL		
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	API No. (YR DRLD/PRE '67) 15189005620000	API No. (YR DRLD/PRE '67) 15189005620000 15189005620000	API No. (YR DRLD/PRE '67) 15189005620000 2740 FL 2540 FEL 2340 F	API No. (YR DRLD:PRE '87) 15189005620000 151890005620000 151890005620000 151890005620000 151890005620000 1518900000000000000000000000000000000000

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.

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API #:15189005620000

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 (Ca	thodic Protection Borehole Intent)			
OPERATOR: License # 32864	Well Location:			
Name: XTO ENERGY INC.	NE Sec. 20 Twp.34 S. R. 36 East West			
Address 1: 210 PARK AVENUE, SUITE 2350	County:Stevens			
Address 2:	Lease Name: KINSER Well #:2			
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal description			
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 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 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.			
Address 2: State: Zip: +				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodi the KCC with a plat showing the predicted locations of lease roads, tank the are preliminary non-binding estimates. The locations may be entered on Select one of the following:	patteries, pipelines, and electrical lines. The locations shown on the plat			
T certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loc 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, and	ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this			
I have not provided this information to the surface owner(s). Lack KCC will be required to send this information to the surface own task, Lacknowledge that Lam being charged a \$30.00 handling for	er(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	e with this form. If the fee is not received with this form, the KSONA-1 will be returned.			
I hereby certify that the statements made herein are true and correct to the	ne best of my knowledge and belief.			
Date: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land			

KDOR #202244

Surface Owners

API#: 151890	005620000	Lease Name: KINSER		Well # 2
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:	
Owner Name:				
Address:				
City:		State:	Zip:	