### 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:	ntea with this form.			
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.: 200418  Lease Name: L G BLACKMER  C Sec. 36 Twp. 31 R. 37W E XW			
Gas Gathering System:				
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.:	T031S - R037W: SEC 036 All			
Entire Project: Yes No				
Number of Injection Wells **	County: Stevens Production Zone(s): CHASE			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE				
** 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)	feet from			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KH			
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:			
New Operator's License No	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			
	00/45/2044			
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Fitzwater			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #has been			
	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			
DISTRICT EPR 10-27-14	PRODUCTION OCT 2 8 2014 UIC OCT 2 8 2014			
Mail to: Past OperatorNew Opera	~~~			

#### Side Two

#### Must Be Filed For All Wells

Lease Name: L G BLACKMER			* Location: 36 31 37WC		
Well No.	API No. (YR DRLD/PRE 167)		Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)
1	15189101150000	2540F5L 2640FSL	2740 FEL 2640 FEL	GAS	ACTIVE
	***************************************	FSL/FNL	FEUFWL		VI
<del></del>		FSL/FNL	FEL/FWL	A	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	***	
		FSL/FNL	FEL/FWL		
<del></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	4	***************************************
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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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.

#### Kansas Corporation Commission Oil & Gas Conservation Division

Form KSONA-t 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	Mall 4 caption.
Name: XTO ENERGY INC.	Well Location:C Sec. 36 Twp.31 S. R. 37 East West
Address 1: 210 PARK AVENUE, SUITE 2350	
Address 2:	Lease Name: L G BLACKMER Well #:1
City: OKLAHOMA CITY State: OK Zip: 73102 +	
Contact Person: BRENDA WALLER	the lease below:
Phone: ( 405 319-3259 Fax: ( )	1031S - R037W: SEC 036 All
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 round in the records of the register or deeds for the
Address 2.	
City: State: Zip:+  If this form is being submitted with a Form C-1 (Intent) or CB-1 (	Cathodic Protection Borehole Intent), you must supply the surface owners and
City: State: Zip:+  If this form is being submitted with a Form C-1 (Intent) or CB-1 (the KCC with a plat showing the predicted locations of lease road)	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (the KCC with a plat showing the predicted locations of lease road are preliminary non-binding estimates. The locations may be enterested to be of the following:    X	Cathodic Protection Borehole Intent), you must supply the surface owners and is, tank batteries, pipelines, and electrical lines. The locations shown on the plat ered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  plice Act (House Bill 2032), I have provided the following to the surface ill 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
If this form is being submitted with a Form C-1 (Intent) or CB-1 (the KCC with a plat showing the predicted locations of lease road are preliminary non-binding estimates. The locations may be enterested one of the following:    X   1 certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or with CP-1 that I am filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number, the control of the surface owner (KCC will be required to send this information to the surface owner).	Cathodic Protection Borehole Intent), you must supply the surface owners and is, tank batteries, pipelines, and electrical lines. The locations shown on the plat ered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  plice Act (House Bill 2032), I have provided the following to the surface ill 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
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If this form is being submitted with a Form C-1 (Intent) or CB-1 (the KCC with a plat showing the predicted locations of lease road are preliminary non-binding estimates. The locations may be enterested one of the following:    X	Cathodic Protection Borehole Intent), you must supply the surface owners and is, tank batteries, pipelines, and electrical lines. The locations shown on the platered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Detice Act (House Bill 2032), I have provided the following to the surface ill be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form electron being filed is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address.  (s). I acknowledge that, because I have not provided this information, the acc owner(s). To mitigate the additional cost of the KCC performing this and ling fee, payable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1 in CP-1 will be returned.

### **Surface Owners**

API#: 15189	101150000	Lease Name:	L G BLACKMER		Well # <u>1</u>
Owner Name:	ALBRIGHT, JOHN LO	OREN & GEOR	GE HOWARD		
Address:	PO BOX 106				
City:	LA VETA	Sta	te: CO	Zip: 81055-0106	
Owner Name:					
Address:					
City:		Sta	te:	Zip:	
Owner Name:					
Address:					
City:		Sta	ite:	Zip:	
Owner Name:					
Address:					
City:		Sta	ite:	Zip:	
Owner Name:					
Address:					
City:		Sta	ite:	Zip:	
Owner Name:					
Address:					
City:		Sta	ite:	Zip:	