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:	lea waa ays win.
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.: 222077 ✓
Gas Gathering System:	Lease Name: L M TILLET
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease: T034S - R039W: SEC 020 SE4 SEC 021 NW4, SW4 SEC 028
Enhanced Recovery Project Permit No.:	10345 - R039W: SEC 020 SE4 SEC 021 NW4, SW4 SEC 028 SW4
Entire Project: Yes No	
Number of Injection Wells **	County: Morton
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	teet from N / S Line of Section
(API No. If Orill Pit, WO or Haul)	teet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling XA
Past Operator's License No32864 \	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. 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
	00/45/0044
	Valv,
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titgoates
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 pi
Permit No.: Recommended action:	permitted by No.:
Date:	Date:
	-
	PRODUCTION OCT 2 8 2014 UIC OCT 2 8 2014
Mail to: Past Operator New Operation	torDistrict

Side Two

Must Be Filed For All Wells

Lease Name	E M TILLET	* Location: 21 34 39WNW			
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)
3	15129215500000	1333FNL	1440FWL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		· · · · · · · · · · · · · · · · · · ·
······································		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		· Womenstein
		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		
	*				

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#:15129215500000

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	athodic Protection Borehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)				
OPERATOR: License #32864 Name: XTO ENERGY INC.	Well Location:				
Address 1: 210 PARK AVENUE, SUITE 2350	County-Morton				
Address 2:	Lease Name: L M TILLET Well #:3				
City: OKLAHOMA CITY State: OK Zip: 73102 +					
Contact Person: BRENDA WALLER	It filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below:				
Phone: (405 319-3259 Fax: ()	T034S - R039W: SEC 020 SE4 SEC 021 NW4, SW4 SEC 028				
Email Address:BRENDA_WALLER@XTOENERGY.COM	SW4				
Surface Owner Information: Name: See Attached Address 1:	When filling 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.				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod the KCC with a plat showing the predicted locations of lease roads, tank					
are preliminary non-binding estimates. The locations may be entered on Select one of the following:	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.				
X I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be low CP-1 that I am filing in connection with this form; 2) if the form b form; and 3) my operator name, address, phone number, fax, and	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				
I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling:	knowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.				
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					
Thereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.				
Date: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land				

KDOR #222077

Surface Owners

API#: 151292	15500000	Lease Name: <u>L M TILLET</u>	Well # <u>3</u>	
Owner Name:	LIGHT, W C			
Address:	P O BOX 287			
City:	ROLLA	State: KS	Zip: 67954-0287	
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:	