#### 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		
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 202094   ✓		
Gas Gathering System:	Lease Name: LT JOHNSON		
Saltwater Disposal Well - Permit No.:	2 25 4014		
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T034S - R039W: SEC 032 NW4 T034S - R040W: SEC 035 SE4 T035S - R040W: SEC 002 SE4, NW4		
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.:	fact from N. i C. Line of Section		
(API No. II Drill Pit, WO or Haul)	feet from N / S Line of Section		
Total District Cottling	feet fromE /W Line of Section		
Type of Pit:	Haul-Off Workover Drilling 化ル		
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		
	Date: 08/15/2014		
DECLIF A TODY COMPLIANCE CUREDVICED	Signature: Nancy Tuzwater		
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection a	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 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:			
Hecommended action:	permitted by No.:		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR _/0-27-/4 F	PRODUCTION OCT 2 8 2014 UIC OCT 2 8 2014		
Mail to: Past Operator New Operato	or District		

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	No.: 202094					
*Lease Name:	L T JOHNSON		, Location: 2 35 40WNW			
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	
1	15129004500000	3960FSL	3960FEL	GAS	ACTIVE	
	424444					
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEUFWL			
		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		and the second s	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	~		
MANUFACTURE - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
			FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL				
		FSL/FNL				

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#:15129004500000

#### 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	Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 32864 Name: XTO ENERGY INC. Address 1: 210 PARK AVENUE, SUITE 2350	Well Location:NW Sec. 2 Twp.35 S. R. 40 East West County:Morton		
	Lease Name: _L T JOHNSON Well #:1		
Address 2:  City: OKLAHOMA CITY State: OK Zip: 73102 +  Contact Person: BRENDA WALLER  Phone: ( 405 319-3259 Fax: ( )  Email Address: BRENDA_WALLER@XTOENERGY.COM	Lease Name: Well #:1  It filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:  T034S - R039W: SEC 032 NW4 T034S - R040W: SEC 035 SE4  T035S - R040W: SEC 002 SE4, NW4		
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.		
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:  X   Certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be lo	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		
	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	fee with this form. If the fee is not received with this form, the KSONA-1 I will be returned.		
I hereby 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 #202094

### **Surface Owners**

API#: 15129	004500000	Lease Name: LT JOHNSON	<b>1</b>	Well # <u>1</u>
Owner Name:	BANE, GARY & RAN	IDY, TR SHARES		
Address:	HC02 BOX 36			
City:	ROLLA	State: KS	Zip: 67954-9401	
Owner Name:	BANE, RANDY & SA	NDRA		
Address:	HCO2 BOX 36			
City:	ROLLA	State: KS	Zip: 67954-9401	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	