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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: most be submit	ttea 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.: 215770				
Gas Gathering System:	Lease Name: _LANDER				
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.:	T033S - R038W: SEC 028 N2, SE4 SEC 029 SE4				
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.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section				
Type of Pit: Emergency Burn Settling	Line of Section E / W Line of Section Haul-Off Workover Drilling 以ん				
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	00/45/0044				
Title: Vice President-Land	Date:				
New Operator's License No. 33999 \(\sqrt{1} \)	Contact Person: NANCY FITZWATER				
New Operator's Name & Address: LINN OPERATING, INC.	204 040 4000				
600 Travis Street, Suite 5100 Houston, TX 77002	i none.				
ooo mayis street, suite 5100 nouston, 17 /7002	Oil / Gas Purchaser: ONEOK FIELD SERVICES				
	Date: 08/15/2014				
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Pitzwater				
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 (Commission. This acknowledgment of transfer pertains to Kansas Corporation				
Commission records only and does not convey any ownership interest in the a					
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 UICOCT 2 8 2014				
Mail to: Past Operator New Operato	or District				

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Side Two

Must Be Filed For All Wells

Lease Name:	LANDER		• Location: 28 33 38WNW				
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		
13	15189211480001	4037FNL	4037FWL	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				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
	-	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		Mark the state of		
		FSL/FNL	FEL/FWL				
	++ + -+	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
The state of the s		FSL/FNL					
		FSL/FNL	FFI/FWI				

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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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 (Cd	athodic Protection Boreh	ole Intent)	X T-1 (Transfer) CP-1 (Plugging Appl	ication)	
OPERATOR: License # 32864 Name:XTO ENERGY INC. Address 1:210 PARK AVENUE, SUITE 2350	Well Location: N County:Stevens	w Sec.	28 _{Twp.} 33 _{S. R.} 38 Eas	West	
		ANDER			
Address 2: City: OKLAHOMA CITY State: OK Zip: 73102 +	Lease Name: LANDER Well ≠:13 It filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below:				
Contact Person: BRENDA WALLER		SEC 028 I	N2, SE4 SEC 029 SE4		
Phone: (405 319-3259 Fax: ()					
Email Address: BRENDA_WALLER@XTOENERGY.COM					
Surface Owner Information:					
Name: See Attached			living multiple surface owners, attach an a		
Address 1:			mation to the left for each surface owner, ound in the records of the register of deed		
Address 2:			te property tax records of the county freas		
City:					
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:	batteries, pipelines, the Form C-1 plat,	s, and ele Form Cl	octrical lines. The locations shown on B-1 plat, or a separate plat may be sui	the plat bmitted.	
I certify that, pursuant to the Kansas Surface Owner Notice Acowner(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, an	cated: 1) a copy of eing filed is a Form	the Fori	m C-1, Form CB-1, Form T-1, or Fort	n	
I have not provided this information to the surface owner(s). I acknowledge that I am being charged a \$30.00 handling f	ner(s). To mitigate	the addi	tional cost of the KCC performing thi	e s	
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	ee with this form. i will be returned.	If the fee	e is not received with this form, the K.	SONA-1	
I hereby certify that the statements made herein are true and correct to t	the best of my know	wledge a	and belief.		
Date: 8/15/2014 Signature of Operator or Agent: Tim Welch			Title:		

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

KDOR #215770

API#:15189211480001

Surface Owners

API#: 151892	211480001	Lease Name: <u>LANDER</u>		Well # <u>13</u>	_
Owner Name:	CURZON, GWENDOLY	YN F ETAL			
Address:	ATTN: GASKILL, JAN	1606 S MAIN			
City:	HUGOTON	State: KS	Zip: 67951-3054		
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:		