District

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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: 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 Gathering System: Lease Name: LEE Saltwater Disposal Well - Permit No.: ___ NE SE SE NW Sec. 22 Two. 25 R. 36W ______feet from N/ S Line Legal Description of Lease: _____feet from 🔲 E / 🔲 W. Line T25S-R36W: SEC 22 ALL Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells _ County: KEARNY Field Name COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): COUNCIL GROVE ** Side Two Must Be Completed. Injection Zone(s): _ feet from N / S Line of Section Surface Pit Permit No.: _ (API No. if Drill Pit, WO or Haul) teet from E / W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling KA Past Operator's License No. **BRENDA WALLER** Contact Person: Past Operator's Name & Address: XTO ENERGY INC. Phone: 405-319-3259 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102 08/15/2014 Tim Welch Vice President-Land Signature: 339991 **NANCY FITZWATER** New Operator's License No. -Contact Person: __ New Operator's Name & Address: LINN OPERATING, INC. 281-840-4000 600 Travis Street, Suite 5100 Houston, TX 77002 Oil / Gas Purchaser:_ 08/15/2014 Date: Title: REGULATORY COMPLIANCE SUPERVISOR Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #___ 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 pit _____. Recommended action: permitted by No.: ___ Date: Date: Authorized Signature Authorized Signature NOV 0 7 2014 UIC NOV 0 7 2014 DISTRICT ___

New Operator

Mail to: Past Operator

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Side Two

Must Be Filed For All Wells

KDOR Lease No.: 207940						
* Lease Name: LEE		* Location: 22 25 36WNW				
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)	
1-2-22	15093203100000 /	2200FNL	2540FWL	GAS	PR	
		FSt/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEUFWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		waa	
	_	FSL/FNL	FEL/FWL	A4		
		FSL/FNL	FEL/FWL	er men ar man		
	***************************************	FSL/FNL	FEL/FWL			
		FSUFNL	FEL/FWL			
		FSUFNL	FEL/FWL			
		FSU/FNL	FEL/FWL			
			•			
		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.

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API#:15093203100000

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) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 32864	Well Location:		
Name: XTO ENERGY INC.	NE SE SE NW Sec. 22 Twp.25 S. R. 36 East West		
	County:KEARNY		
Address 1: 210 PARK AVENUE, SUITE 2350 Address 2:	Lease Name: LEE Well #:1-2-22		
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: T25S-R36W: SEC 22 ALL		
Contact Person: BRENDA WALLER			
Phone: (405 319-3259 Fax: ()			
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.		
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:	batteries, pipelines, and electrical lines. The locations shown on the plat-		
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 loced CP-1 that I am filing in connection with this form; 2) if the form beform; 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		
	knowledge that, because I have not provided this information, the her(s). To mitigate the additional cost of the KCC performing this ee, 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	ee 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 t	he best of my knowledge and belief.		
Date: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land		
- Signature of Spending of Agents	*****		

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

KDOR #207940

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Surface Owners

API#: <u>15093203100000</u>		Lease Name: <u>LEE</u>		Well # <u>1-2-22</u>
Owner Name:	BOEGEL FARMS LL	С		
Address:	PO BOX 273			
City:	LAKIN	State: KS	Zip: 67860	
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:	