RECEIVED AUG 20 2014 **KCC WICHITA**

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:	ifted 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.: 207949			
Gas Gathering System:	Lease Name: LEE			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	0 - 0 - 0 . NW Sec. 29 Twp. 25 R. 36W EXW			
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T25S-R36W: SEC 29 ALL			
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):			
Surface Pit Permit No.:(API No. it Drill Pit, WO or Haul)	feet fromN /S Line of Section			
	teet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KN			
Past Operator's License No	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: Tim Welch			
New Operator's License No	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:			
	Date: 08/15/2014			
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Fitgwater			
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 pit			
Permit No.: Recommended action:	·			
	permitted by No.:			
Date:	Data			
Date:	Date:			
	PRODUCTION NOV 0 7 2014 UIC NOV 0 7 2014			
Mail to: Past Operator New Opera				

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Side Two

Must Be Filed For All Wells

KDOR Leas	e No.: 207949		And the second s			
*Lease Name	LEE * Location: 29 25 36WNW					
Well No.	API No. (YR DRLD/PRE '67)			Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
10-2-29	15093203320000	1320FNL	1320FWL	GAS	PR	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEUFWL			
			FEL/FWL			
	=	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSU/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEUFWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSUFNL	FEL/FWL			
44.		FSL/FNL	FEL/FWL			

A separate sheet may be attached if necessary

^{*}When transferring a unit which consists of more than one lease please flie 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#:15093203320000

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 (Ca	nthodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License #32864	Well Location:		
Name: XTO ENERGY INC.	0 0 0 NW Sec. 29 Twp.25 S. R. 36 East West		
Address 1: 210 PARK AVENUE, SUITE 2350	County:KEARNY		
Address 2:	Lease Name: LEE Well #:10-2-29		
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal description o		
Contact Person: BRENDA WALLER	the lease below:		
Phone: (405 319-3259 Fax: ()	T25S-R36W: SEC 29 ALL		
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 (Cathodic the KCC with a plat showing the predicted locations of lease roads, tank to are preliminary non-binding estimates. The locations may be entered on a Select one of the following: X	patteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. It (House Bill 2032), I have provided the following to the surface tated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form		
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, and			
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling fe	er(s). To mitigate the additional cost of the KCC performing this		
If choosing the second option, submit payment of the \$30.00 handling fe- 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 the	ne best of my knowledge and belief.		
Date: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land		

KDOR #207949

Surface Owners

API#: 150932	203320000	Lease Name: LEE		Well # <u>10-2-29</u>				
Owner Name: WAGON MOUND RANCH LLC ETAL								
Address:	6001 DURRETT DR							
City:	AMARILLO	State: TX	Zip: 79124					
Owner Name:								
Address:								
City:		State:	Zip:					
Owner Name:								
Address:								
City:		State:	Zip:					
Owner Name:								
Address:								
City:		State:	Zip:					
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City:		State:	Zip:					