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:	itted with this form.		
Oil Lease: No. of Oil Wells***	Effective Date of Transfer: KS Dept of Revenue Lease No.: Lease Name: LEE		
Gas Lease: No. of Gas Wells "			
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	0 . SW NE. SW Sec. 29 Twp. 25 A. 36W EX		
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): CHASE Injection Zone(s):		
** Side Two Must Be Completed.			
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section		
	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling 火人		
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	Signature: Tim Welch		
New Operator's License No	Contact Person: NANCY FITZWATER		
New Operator's Name & Address; LINN OPERATING, INC.	Phone:		
600 Travis Street, Suite 5100 Houston, TX 77002	Oil / Gas Purchaser:		
	00/45/0044		
Title: _REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titzwater		
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.		
	1		
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:		
Date:	Authorized Signature		
DISTRICT EPR	PRODUCTION NOV 0 7 2014 UICNOV 0 7 2014		
Mail to: Past Operator New Operat			

Side Two

Must Be Filed For All Wells

* Lease Name: LEE		* Location: 29 25 36WSW			
Well No.	API No. (YR DRLD/PRE '67)		Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/Ta'D/Abandoned)
101-29	15093208900000	1450FSL	1350FWL	GAS	PR
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		M. 4
		FSL/FNL	FEL/FWL		400000000000000000000000000000000000000
		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		
		FSUFNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSUFNL	FEL/FWL		
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			FEL/FWL		
****		roi mi	FEL/FWL		
					4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
		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#:15093208900000

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 (Cat	hodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 32864 Name: XTO ENERGY INC.	Well Location: 0 SW NE SW Sec. 29 Twp. 25 S. R. 36 East West		
Address 1: 210 PARK AVENUE, SUITE 2350	County:KEARNY		
Address 2:	Lease Name: Well #:101-29		
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below: T25S-R36W: SEC 29 ALL		
Contact Person: BRENDA WALLER			
Phone: (405 319-3259 Fax: ()	1235-R36W: SEC 29 ALL		
Email Address: BRENDA_WALLER@XTOENERGY.COM			
Surface Owner Information:			
Name: See Attached	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1:	sheet fisting all of the information to the left for each surface owner. Surface		
Address 2:	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.		
City:			
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 b are preliminary non-binding estimates. The locations may be entered on t	atteries, pipelines, and electrical lines. The locations shown on the plat		
Select one of the following:			
Example 1 Learning that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be located 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 I have not provided this information to the surface owner(s). I ack	ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Forming filed is a Form C-1 or Form CB-1, the plat(s) required by this email address.		
KCC will be required to send this information to the surface owner 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 to			
I hereby certify that the statements made herein are true and correct to the	e best of my knowledge and belief.		
Date: 8/15/2014 Signature of Operator or Agent: Tim Welch	Title: Vice President-Land		

KDOR #214904

Surface Owners

API#: 150932	208900000	Lease Name: <u>LEE</u>	···	Well # <u>10l-29</u>
Owner Name:	BERLIER RANCH LI	LC		
Address:	241 ROAD T			
	LAKIN	State: KS	Zip: 67860	
city.		State. No	Σiβ. 0/000	
O				
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
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Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	