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.

Gas Gathering System: Saltwater Disposal Well - Permit No.: Spot Location: feet from Feet from Net Settine feet from Feet	wenue Lease No.: 202409 LEE 0		
Gas Gathering System: Gas Gathering System:	LEE O C Sec. 21 Twp. 25 H. 36W EXW ion of Lease: SEC 21 ALL ARNY ne(s): CHASE (s): Sec. 21 Twp. 25 H. 36W EXW The control of Lease: Morkover N / S Line of Section Workover Drilling , 24		
Saltwater Disposal Well - Permit No.: Spot Location: feet from N / S Line legal Descrip T25S-R36W: Entire Project: Yes No Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Field Name: (API No. if Drill Ptt. WO or Haul) Type of Pit: Emergency Burn Settling Haul-Off Contact Perso Past Operator's Name & Address: XTO ENERGY INC. Lease Name: 0 0 0 Legal Descrip T25S-R36W: County: KE Production Zo Injection Zone API No. if Drill Ptt. WO or Haul) Contact Perso Phone: 405-3	O C Sec. 21 Twp. 25. A. 36W EXW ion of Lease: SEC 21 ALL ARNY ne(s): CHASE (s): S Line of Section feet from E / W Line of Section Workover Drilling , 24		
Saltwater Disposal Well - Permit No.: Spot Location: feet from N / S Line feet from E / W Line T25S-R36W: Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Field Name: Side Two Must Be Completed. Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling Haul-Off Past Operator's License No. 32864 Contact Perso Phone: 405-3	O C Sec. 21 Twp. 25. A. 36W EXW ion of Lease: SEC 21 ALL ARNY ne(s): CHASE (s): S Line of Section feet from E / W Line of Section Workover Drilling , 24		
Legal Descrip T25S-R36W: Enhanced Recovery Project Permit No.:	ion of Lease: SEC 21 ALL ARNY ne(s): CHASE (s): S Line of Section feet from E / W Line of Section Workover Drilling , 2.4		
Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells County: KE Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zo *** Side Two Must Be Completed. Injection Zone Surface Pit Permit No.: (API No. it Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling Haul-Off Past Operator's License No. 32864 Contact Perso Past Operator's Name & Address: XTO ENERGY INC. Phone: 405-3	SEC 21 ALL ARNY ne(s): CHASE (s): S Line of Section feet from E / W Line of Section Workover Drilling , LH		
Entire Project: Yes No Number of Injection Wells	ARNY ne(s); CHASE (s): Stine of Section feet from F / W Line of Section Workover Drilling , LH		
Number of Injection Wells County: _KE Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zo *** Side Two Must Be Completed. Injection Zone Surface Pit Permit No.:	re(s); CHASE (s): S Line of Section feet from E / W Line of Section Workover Drilling , LH		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE *** Side Two Must Be Completed. Surface Pit Permit No.: (API No. it Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling Haul-Off Past Operator's License No. 32864 Contact Person Past Operator's Name & Address: XTO ENERGY INC. Phone: 405-3	re(s); CHASE (s): S Line of Section feet from E / W Line of Section Workover Drilling , LH		
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** Side Two Must Be Completed. Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling Haul-Off Past Operator's License No. 32864 Contact Person Past Operator's Name & Address: XTO ENERGY INC. Phone: 405-3	feet from N / S Line of Section feet from E / W Line of Section Workover Drilling		
(API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling Haul-Off Past Operator's License No. 32864 Contact Person Past Operator's Name & Address: XTO ENERGY INC. Phone: 405-3	teet from E / W Line of Section Workover Drilling		
Past Operator's License No. 32864 Contact Person Past Operator's Name & Address: XTO ENERGY INC. Phone: 405-3	PREMIA MANAGEMENT		
Past Operator's Name & Address: XTO ENERGY INC. Phone: 405-3	BRENDA WALLER		
- 11Wit. 999			
OAO DADIK ANTANIA ANTANIA	19-3259		
210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102 Date: 08/15	/2014		
Title: Vice President-Land Signature:	Tim Wolch		
New Operator's License No Contact Persor	NANCY FITZWATER		
New Operator's Name & Address: LINN OPERATING, INC. Phone: 281	-840-4000		
600 Travis Street, Suite 5100 Houston, TX 77002	aser:		
	15/2014		
Title: REGULATORY COMPLIANCE SUPERVISOR Signature:	Nancy Titzwater		
Acknowledgment of Transfer: The above request for transfer of injection authorization, surfa-	ce pit permit #has been		
noted, approved and duly recorded in the records of the Kansas Corporation Commission. This			
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		
About many and a second	or of the above named lease containing the surface pit		
Down't Mi			
permitted by No	· .		
Date: Date:			
Authorized Signature	Authorized Signature		
DISTRICT EPR PRODUCTION New Operator New Operator			



Side Two

Must Be Filed For All Wells

* Lease Name	LEE	* Location: 21 25 36WC				
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)	
3-21	15093003220000 /	2640FNL	2640FEL	GAS	PR	
		· · · · · · · · · · · · · · · · · · ·	FEUFWL			
		FSL/FNL				
		FSL/FNL	FEL/FWL	PROBLEM TO THE PROPERTY OF THE		
		FSUFNL	FEL/FWL			
19-7		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
W		FSL/FNL	FEL/FWL		***************************************	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEUFWL			
		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		-	
		FSL/FNL	FEUFWL			
·		FSL/FNL	FEL/FWL			
		FOL/FINL	FEUFWL			

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#:15093003220000

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 (Cathodic Protection Borehole Intent) X T-1 (1	framsfer) CP-1 (Plugging Application)		
OPERATOR: License # 32864	Well Location:			
Name: XTO ENERGY INC.		25 S. R. 36 East West		
Address 1: 210 PARK AVENUE, SUITE 2350	County:KEARNY	23. REds[6] West		
Address 2:	, mp-	Well #:3-21		
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal description			
Contact Person: BRENDA WALLER	the lease below:			
Phone: (405 319-3259 Fax: ()	T25S-R36W: SEC 21 ALL			
Email Address: BRENDA_WALLER@XTOENERGY.COM	_			
Surface Owner Information:				
Name: See Attached		ple surface owners, attach an additional		
Address 1:	sheet listing all of the information to t owner information can be found in the	he left for each surface owner. Surface Precords of the register of deeds for the		
Address 2:				
City:	_			
the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered Select one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form	on the Form C-1 plat, Form CB-1 plat, o Act (House Bill 2032), I have provided located: 1) a copy of the Form C-1, Fo being filed is a Form C-1 or Form CB-	the following to the surface		
form; and 3) my operator name, address, phone number, fax. Thave not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handling.	Lacknowledge that, because I have not power(s). To mitigate the additional cos	Lof the KCC performing this		
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 C.	ng fee with this form. If the fee is not red P-1 will be returned.	ceived with this form, the KSONA-1		
I hereby certify that the statements made herein are true and correct	to the best of my knowledge and belief.			
Date: 8/15/2014 Signature of Operator or Agent: Tim Web	leh Title: \	/ice President-Land		
	Title,			

KDOR #202409

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Surface Owners

API#: 150930	003220000	Lease Name: LEE		Well # <u>3-21</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:	