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: 8/15/2014 Oil Lease: No. of Oil Wells \_\_\_ Effective Date of Transfer: 1 Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: \_ Gas Gathering System:\_\_\_ Lease Name: LEE Saltwater Disposal Well - Permit No.: SW Sec. 19 Twp. 26 R. 36W FXW \_\_\_\_\_\_feet from N / S Line \_\_\_\_\_feet from E / W Line Legal Description of Lease: T026S - R036W: SEC 019 All Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells \_\_\_ County: Kearny Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE **COUNCIL GROVE** Production Zone(s): \*\* Side Two Must Be Completed. Injection Zone(s): Surface Pit Permit No.: \_\_\_ \_\_ feet from \_\_ N / \_\_ S Line of Section (API No. if Drill Pit, WO or Hauli teet from E / W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover Past Operator's License No. \_32864 / **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: New Operator's License No. 33999 NANCY FITZWATER Contact Person: \_ New Operator's Name & Address: LINN OPERATING, INC. 281-840-4000 600 Travis Street, Suite 5100 Houston, TX 77002 Oil / Gas Purchaser: ONEOK FIELD SERVICES 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: Authorized Signature Authorized Signature DISTRICT \_\_\_\_\_ THE NOV 0 7 2014 PRODUCTION \_ Mail to: Past Operator \_\_\_\_ **New Operator** 

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#### Side Two

#### Must Be Filed For All Wells

* Lease Name	: LEE		* Location: 19 26 36WSW			
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)	
34	15093201040000 /	1320FSL	3960FEL	GAS	ACTIVE	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	444	FSL/FNL	FEL/FWL			
W. A.		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	/10		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		<b>50. 5.</b> 1	FEL/FWL			
The state of the s						
		FSL/FNL	FEL/FWL			

A separate sheet may be attached if necessary

<sup>\*</sup> 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#:15093201040000

### 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	1 (Cathodic Protection Borehole Intent) X T-1 (T	iansfer) CP-1 (Plugging Application)		
OPERATOR: License # 32864	Mall			
Name: XTO ENERGY INC.	Well Location:			
Address 1: 210 PARK AVENUE, SUITE 2350	County-Kearny			
Address 2:	LEE	Well #:34		
City: OKLAHOMA CITY State: OK Zip: 73102 +				
Contact Person: BRENDA WALLER	It filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: T026S - R036W: SEC 019 All			
Phone: ( 405 319-3259 Fax: ( )				
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 listing all of the information to the owner information can be found in the	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		
Address 2:	county, and in the real estate property tax records of the county treasurer.			
City: State: Zip:+				
the KCC with a plat showing the predicted locations of lease roads, tal are preliminary non-binding estimates. The locations may be entered Select one of the following:	nk batteries, pipelines, and electrical line on the Form C-1 plat, Form CB-1 plat, o	es. The locations shown on the plat r a separate plat may be submitted.		
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 form; and 3) my operator name, address, phone number, fax,	located: 1) a copy of the Form C-1, For being filed is a Form C-1 or Form CB-	rm CB-1 Form T-1 or Form		
I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface c task, I acknowledge that I am being charged a \$30.00 handling.	owner(s). To mitigate the additional cost	of 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 CF	g fee with this form. If the fee is not rec 2-1 will be returned.	eived with this form, the KSONA-1		
I hereby certify that the statements made herein are true and correct t	to the best of my knowledge and belief.			
Date: Signature of Operator or Agent: Weld	h Title: \	/ice President-Land		
	, and	77.72		

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

KDOR #208456

#### **Surface Owners**

API#: 150932	201040000	Lease Name: <u>LEE</u>		Well # <u>34</u>			
Owner Name: BERLIER RANCH LLC ETAL							
Address:	241 ROAD T						
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:				