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:	4. 排除性的 人名德里斯尔特 人名英格兰人姓氏 化二甲基甲基苯基甲基苯基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲
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.: 220770
Gas Gathering System:	Lease Name: BROWNELL
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T032S - R035W: SEC 006 E2 SW4, SE4, S2 NE4, SE4 NW4 (NENE) (NWNE) (NENW) (NWNW) (SWNW) (NWSW) (SWSW)
Entire Project: Yes No	
Number of Injection Wells **	County: Stevens
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drift Pit, WO or Haul)	그는 걸음 그렇게 그 그들은 그렇다 그 그 없는
	feet from E / W Line of Section Haul-Off
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling 以此
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
	Tim Welch
Title: Vice President-Land	Signature:
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:ONEOK FIELD SERVICES
	Date: 08/15/2014
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature:
Acknowledgment of Transfer: The above request for transfer of injection a	
noted, approved and duly recorded in the records of the Kansas Corporation C	
Commission records only and does not convey any ownership interest in the a	above injection well(s) or pit permit.
	and the companied as
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 pi
Permit No.: Recommended action:	permitted by No.:
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR / 2 - 3 - 14 F	PRODUCTION D.E.C. 0.4 2014
Mail to: Past Operator New Operato	or District

Side Two

Must Be Filed For All Wells

* Lease Name:	BROWNELL	Location: 6 32 35WSW				
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) ACTIVE	
12 INF	1310320030002	660FSL	4620FEL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL				
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<u>.</u>		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
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		FSL/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.

API#:15189208560002

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)				
OPERATOR: License #32864 Name: XTO ENERGY INC.	Well Location:SW Sec. 6 Twp. 32 S. R. 35 East West				
Address 1: 210 PARK AVENUE, SUITE 2350	County: Stevens				
Address 2:	Lease Name: BROWNELL Well #:1-2 INF				
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description				
Contact Person: BRENDA WALLER	the lease below:				
Phone: (405319-3259Fax: ()	T032S - R035W: SEC 006 E2 SW4, SE4, S2 NE4, SE4 NW4 (NENE) (NWNE) (NENW) (NWNW) (SWNW) (NWSW) (SWSW)				
Email Address: BRENDA_WALLER@XTOENERGY.COM	(MEME) (MARINE) (MEMAA) (MARINAA) (SAAMAA) (MARSAA) (SAASAA)				
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 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, tank are preliminary non-binding estimates. The locations may be entered or Select one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be keepen that I am filling in connection with this form; 2) if the form the form; and 3) my operator name, address, phone number, fax, at	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ceing filed is a Form C-1 or Form CB-1, the plat(s) required by this nd email address. cknowledge that, because I have not provided this information, the				
KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling	ner(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 CP-	fee with this form. If the fee is not received with this form, the KSONA-1 1 will be returned.				
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.				
Date: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land				
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KDOR #220770

Surface Owners

API#: 151892	208560002	Lease Name: BROWNELL		Well # <u>12 INF</u>
Owner Name:	LAHEY, THOMAS L	& PATRICIA		
Address:	2711 ROAD Z			
City:	MOSCOW	State: KS	Zip: 67952-5246	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
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Owner Name:				
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City:		State:	Zip:	