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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 Effective Date of Transfer: Oil Lease: No. of Oil Wells Gas Lease: No. of Gas Wells _____ KS Dept of Revenue Lease No .: _ Gas Gathering System: Lease Name: BRUBAKER Saltwater Disposal Well - Permit No.: _ SE Sec teet from N / S Line Legal Description of Lease: _ feet from L E / L W Line T032S - R036W: SEC 007 E2 SW4, SE4, NE4, E2 NW4 (NWNW) Enhanced Recovery Project Permit No.: _ (SWNW) (NWSW) (SWSW) From 0 feet to bottom Permian Entire Project: Yes No Number of Injection Wells County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s):_ ** Side Two Must Be Completed. Injection Zone(s):_ N / S Line of Section Surface Pit Permit No .: . feet from (API No. If Drill Pit, WO or Haul) W Line of Section feet from KAK Drilling Haul-Off Workover Settlina Type of Pit: Emergency Rum **BRENDA WALLER** Past Operator's License No. __32864 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 Phone: Oil / Gas Purchaser: ONEOK FIELD SERVICES 600 Travis Street, Suite 5100 Houston, TX 77002 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 permitted by No.: __ __ . Recommended action: Date: Authorized Signature EPR DISTRICT -New Operator_ District Mail to: Past Operator

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Side Two

Must Be Filed For All Wells

.ease Name:	BRUBAKER		* Location: 7 32 36WSE				
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned		
24 INF	15189220030000 🗸	1450FSL	1250FEL	Maria de la composición del composición de la co	ACTIVE		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FELFWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
a HI. I b gara		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		<u>. 17 72 4 19 4.</u> 7 1 4 17 7		
1		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNI	FEL/FWL				
		FSL/FNI	FEL/FWL				
		FSL/FNI	FEL/FWL				
		FSL/FN	FEL/FWL				
		FSL/FN	FEL/FWL				
		FSL/FN	L FEL/FWL				
		FSL/FN	L FEL/FWL				
		FSL/FN	LFEL/FWL				
		FSL/FN	LFEL/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.

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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.

	(Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)				
OPERATOR: License # 32864	SE _ Sec. 7 _ Twp. 32 _ S. R. 36Eas				
Name: XTO ENERGY INC.					
Address 1: 210 PARK AVENUE, SUITE 2350	County: Stevens				
Address 2:	Lease Name: BRUBAKER Well #:2-4 INF				
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: T032S - R036W: SEC 007 E2 SW4, SE4, NE4, E2 NW4				
Contact Person: BRENDA WALLER					
Phone: (405 319-3259 Fax: ()	(NWNW) (SWNW) (NWSW) (SWSW) From 0 feet to bottom				
Email Address: BRENDA_WALLER@XTOENERGY.COM	Permian				
Surface Owner Information:					
Name: See Attached	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				
Address 1:	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:+	-				
which work a plat charging the predicted locations of loase reads 18	hodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat I on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.				
X I certify that, pursuant to the Kansas Surface Owner Notice	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this , and email address.				
VCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ing fee, payable to the KCC, which is enclosed with this form.				
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 received with this form, the KSONA-1 P-1 will be returned.				
I hereby certify that the statements made herein are true and correct					
Date: Signature of Operator or Agent: Wa	Title: Vice President-Land				
API # :15189220030000 KDOR #22075					

Surface Owners KCC WICHITA

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API#: 151892	220030000	Lease Name: BRUBAKER		Well # 24 INF
Owner Name:	MOSER FARM LIV T	R, DENNIS E & ELIZABETH A	CO-TTEES	
	1932 ROAD 16			
	MOSCOW	State: KS	Zip: 67952-9518	
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:		_	71	
City:		State:	Zip:	