081514_Buckley_1.pdf

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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:	
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 8/15/2014
X Gas Lease: No. of Gas Wells 1	KS Dept of Revenue Lease No.: 200408
Gas Gathering System:	Lease Name: BUCKLEY
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.:	T035S - R036W: SEC 011 SW4, NW4, E2
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 feet from E / W Line of Section Haul-Off Workover Drilling
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. 33999	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
THE PECULATORY COMPLIANCE CUREDWOOD	000 000
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titzwater
Acknowledgment of Transfer: The above request for transfer of injection a	
	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the a	bove 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
Permit No.: Recommended action:	[- Baran - Ba
. necontinue ad action:	permitted by No.:
Date	
Date:	Date:
10-11-11	DEC 0.5 2014 DEC 0.5 2014
Mail to: Past Operator New Operator	

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Side Two

Must Be Filed For All Wells

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) 1 15189007140001 ✓ 2540FSL ✓ 2740FEL ✓ GAS	Well Status (PROD/TA'D/Abandoned) ACTIVE
	ACTIVE
FSL/FNL FEL/FWL	
FEL/FWL	
FSL/FNL FEL/FWL	
FSL/FNL FEL/FWL	
FSL/FNL FEL/FWL FEL/FWL	
FSL/FNL FEL/FWL	
FSL/FNLFEL/FWL	
FSL/FWL FEL/FWL FILES FI	
FSL/FNL FEL/FWL	
FSL/FNL FEL/FWL	
FSL/FNL FEL/FWL	
FSL/FNL FEL/FWL FEL/FWL	
FSL/FNL FEL/FWL	
FSL/FNL FEL/FWL	
FSUFNL FEUFWL FILE CONTROL CON	
FSL/FNL FEL/FWL FEL/FWL	
FSL/FNL FEL/FWL	
FSL/FNL FEL/FWL	
FSL/FNL FEL/FWL	
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.

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API #:15189007140001

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.

2004			
OPERATOR: License # 32864	Well Location:		
Name: XTO ENERGY INC.			
Address 1: 210 PARK AVENUE, SUITE 2350	County: Stevens		
Address 2:			
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: BRENDA WALLER	the lease below: T035S - R036W: SEC 011 SW4, NW4, E2		
Phone: (405 319-3259 Fax: ()	<u> </u>		
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 left for each surface owner. Surface owner information can be found in the records of the register of deeds for the 		
Address 2:			
City:			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Care of the Care of the	athodic Protection Borehole Intent), you must supply the surface owners and		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Country the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entent Select one of the following:	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Counties the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entent select one of the following: X I certify that, pursuant to the Kansas Surface Owner Notion owner(s) of the land upon which the subject well is or will	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. ce Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this		
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KDOR #200408

Surface Owners

rs A

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API#: <u>151890</u>	007140001	Lease Name: BUCKL	EY	Well # <u>1</u>
Owner Name:	GOOCH, PHILIP C &	MICHELLE LOCK-GOO	СН	
Address:	1872 ROAD C			
City:	HUGOTON	State: KS	Zip: 67951-5176	
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:	