081514_CG_Carpenter_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: MUST be submitted	ted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:8/15/2014			
X Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 200754			
Gas Gathering System:	Lease Name: _C G CARPENTER			
Saltwater Disposal Well - Permit No.:	SW_Sec11Twp32R37W			
Spot Location: feet from N / S Line				
feet from	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T032S - R037W: SEC 011 SE4, NW4, SW4, NE4			
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.:(API No. II Drill Pit, WO or Haul)	feet from N / S Line of Section feet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off ☐ Workover ☐ Drilling ∠H			
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			
Title: Vice President-Land	Signature: Tim Welch			
New Operator's License No. 33999 '	Contact Person: NANCY FITZWATER			
New Operator's Name & Address: LINN OPERATING, INC.	Phone:			
600 Travis Street, Suite 5100 Houston, TX 77002	Oil / Gas Purchaser: ONEOK FIELD SERVICES			
	Date: 08/15/2014			
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titzwator			
Acknowledgment of Transfer: The above request for transfer of injection				
	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			
Permit No.: Recommended action:	permitted by No.:			
Date:	Date:			
Authorized Signature	SEC 0 5 2814 Authorized Signature			
00111101	PRODUCTION UIC LO U ZOTA			
Mail to: Past Operator New Operat	tor District			

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Side Terr

Must Be Filed For All Wells

* Lease Name	C G CARPENTER		Location: 11	32 37WSW		
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)	
1	15189002370000 /	2540FSL	2740FEL	GAS	ACTIVE	
		FSL/FNL	FEL/FWL			
	la de la	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	<u> </u>	FSL/FNL	FEL/FWL			
<u>, 40</u> 		FSL/FNL				
		FSL/FNL				
		FSL/FNL				
		FSL/FNL				
		FSL/FNL				
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL				
		FSL/FNL				
		FSL/FNL				
		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#:15189002370000

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.

32864	Moll Location			
OPERATOR: License # 32864 Name: XTO ENERGY INC.				
Name:XTO ENERGY INC. Address 1:210 PARK AVENUE, SUITE 2350				
Address 2:	Lease Name: C G CARPENTER Well #:1			
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below:			
Contact Person: BRENDA WALLER	T032S - R037W: SEC 011 SE4, NW4, SW4, NE4			
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 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 a editation.			
City:				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Catholic Country and showing the predicted locations of lease roads	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Catho KCC with a plat showing the predicted locations of lease roads	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 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered Select one of the following: X certify that, pursuant to the Kansas Surface Owner Notice (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 plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The locations shown on the plated on the Form C-1 plat, or a separate plat may be submitted. The locations are supplied in the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the plate is a Form C-1 or Form CB-1, the plate is a separate owners and the surface being filed is a Form C-1 or Form CB-1, the plate is a form C-1 or Form CB-1, the plate is a form the surface owners and the surface owners are surface owners.			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered Select one of the following: X certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, face I have not provided this information to the surface owner(s) KCC will be required to send this information to the surface.	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. The control of the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the plat is a Form C-1 or Form CB-1, the plat(s) required by this			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered select one of the following: X	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The electrical lines are plat may be submitted.			
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Surface Owners

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API#: 151890	002370000	Lease Name: <u>C</u>	G CARPENTER	Well	# <u>1</u>
Owner Name:	WILSON HEIRS, OLET	'A			
	Attn: FULLER, DORIS		PO BOX 42	3	
				67951-0426	
City:	HUGOTON	State:	KS Zip:	07931-0420	
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
		. .	 -		
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
		a. .			
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		