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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 awart be Elling

is acknowledged as

the new operator of the above named lease containing the surface pit

Authorized Signature

District

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.

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 200870 KS Dept of Revenue Lease No.: _ Gas Lease: No. of Gas Wells Lease Name: C L DEW B Gas Gathering System: Saltwater Disposal Well - Permit No.: _ _ feet from N / S Line Spot Location: _ Legal Description of Lease: feet from E / W Line T027S - R035W: SEC 005 All Enhanced Recovery Project Permit No.: Entire Project: Yes No County: Grant Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s):_ CHASE ** Side Two Must Be Completed. Injection Zone(s):_ N / S Line of Section feet from Surface Pit Permit No.: (API No. If Drill Pit, WO or Haul) W Line of Section feet from КH Drilling Workover Haul-Off Settling Emergency Type of Pit: **BRENDA WALLER** 32864 Contact Person: _ Past Operator's License No. Phone: 405-319-3259 Past Operator's Name & Address: XTO ENERGY INC. 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102 08/15/2014 Tim Welch Vice President-Land **NANCY FITZWATER** New Operator's License No. 33999 / Contact Person: _ 281-840-4000 New Operator's Name & Address: LINN OPERATING, INC. Phone: Oil / Gas Purchaser: WGP-KHC LLC 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.

New Operator

permitted by No.: ___

PRODUCTION NOV 1 9 2014

is acknowledged as

the new operator and may continue to inject fluids as authorized by

Date:

DISTRICT ___

Mail to: Past Operator _

_____. Recommended action: _

Authorized Signature

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Side Two

Must Be Filed For All Wells

Lease Name:	C L DEW B	Location: 5 27 35WSE				
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	15067002760000/	2310FSL ^	2310FEL	GAS	ACTIVE	
		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	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	Bally Ba Bally Bally Ba	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNI	FEL/FWI			
		FSL/FNI	FEL/FWI			
		FSL/FNI	L FEL/FWI			
		FSL/FN	LFEL/FW			
		FSL/FN	LFEL/FW			
		FSL/FN	LFEL/FW			
	罗达巴 透光通温温管 用了 中间用了一种 医克勒里氏	FSL/FN	LFEL/FW			
Property of the second of the		FSL/FN	ILFEL/FW			

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.

OPERATOR: License # 32864	OF # 07 75 K 1_ M 1
Name: XTO ENERGY INC.	
Address 1: 210 PARK AVENUE, SUITE 2350	County: Grant Lease Name: C L DEW B Well #:1
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 the lease below:
Contact Person: BRENDA WALLER	T027S - R035W: SEC 005 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 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 or deeds for the
Address 2:	county, and in the real estate property tax records of the county treasurer.
Address 2: State: Zip:+ City: State: Zip:+ If this form is being submitted with a Form C-1 (Intent) or CB-	1 (Cathodic Protection Borehole Intent), you must supply the surface owners and
City: State: Zip:+ If this form is being submitted with a Form C-1 (Intent) or CB- the KCC with a plat showing the predicted locations of lease ro are preliminary non-binding estimates. The locations may be e	1 (Cathodic Protection Borehole Intent), you must supply the surface owners and
State: Zip:+ If this form is being submitted with a Form C-1 (Intent) or CB- the KCC with a plat showing the predicted locations of lease ro are preliminary non-binding estimates. The locations may be e Select one of the following: X certify that, pursuant to the Kansas Surface Owner	1 (Cathodic Protection Borehole Intent), you must supply the surface owners and pads, tank batteries, pipelines, and electrical lines. The locations shown on the plat entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Notice Act (House Bill 2032), I have provided the following to the surface r will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
State: Zip:+ If this form is being submitted with a Form C-1 (Intent) or CB- the KCC with a plat showing the predicted locations of lease ro are preliminary non-binding estimates. The locations may be e Select one of the following: X I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if I form; and 3) my operator name, address, phone numb	1 (Cathodic Protection Borehole Intent), you must supply the surface owners and pads, tank batteries, pipelines, and electrical lines. The locations shown on the plat entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Notice Act (House Bill 2032), I have provided the following to the surface r will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
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If this form is being submitted with a Form C-1 (Intent) or CB- the KCC with a plat showing the predicted locations of lease ro are preliminary non-binding estimates. The locations may be a Select one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if it form; and 3) my operator name, address, phone numb I have not provided this information to the surface own KCC will be required to send this information to the s task, I acknowledge that I am being charged a \$30.00	1 (Cathodic Protection Borehole Intent), you must supply the surface owners and bads, tank batteries, pipelines, and electrical lines. The locations shown on the plat entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Notice Act (House Bill 2032), I have provided the following to the surface r will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this per, fax, and email address. Der(s). I acknowledge that, because I have not provided this information, the urface owner(s). To mitigate the additional cost of the KCC performing this behandling fee, payable to the KCC, which is enclosed with this form. The handling fee with this form. If the fee is not received with this form, the KSONA-Form CP-1 will be returned.

Surface Owners

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45067002760000	Lease Name: CLDEW B		Well # <u>1</u>	
API#: <u>15067002760000</u>			 -	
Owner Name: DEW FARMS INC				
Address: PO BOX447				
City: ULYSSES	State: KS	Zip: 67880		
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:		