District

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DISTRICT -

Mail to: Past Operator_

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

ch 2010 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 208415 KS Dept of Revenue Lease No.: Gas Lease: No. of Gas Wells Lease Name: CANARY Gas Gathering System: Saltwater Disposal Well - Permit No.: __ feet from N / S Line Legal Description of Lease: feet from | E / W Line T027S - R037W: SEC 010 NE4, SE4, W2 Enhanced Recovery Project Permit No.: Entire Project: Yes No County: Grant Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE **COUNCIL GROVE** Production Zone(s):_ ** Side Two Must Be Completed. Injection Zone(s): N / S Line of Section Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) E / W Line of Section K4 Drilling Workover Settling Haul-Off Burn Type of Pit: Emergency **BRENDA WALLER** Contact Person: 32864 / Past Operator's License No. Phone: 405-319-3259 Past Operator's Name & Address: XTO ENERGY INC. 08/15/2014 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102 Tim Welch Vice President-Land NANCY FITZWATER New Operator's License No. __33999' 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 Signature: Title: REGULATORY COMPLIANCE SUPERVISOR 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 of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by permitted by No.: _ __. Recommended action: Date: Authorized Signature NOV

New Operator

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Side Two

Must Be Filed For All Wells

ase Name: CANARY		* Location: 10 27 37WS2					
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/Abandone			
2 15067202730000	1316 1285FSL	2690 2565 FEL	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					
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	FSL/FNL	FEL/FWL					
	FSL/FNL	FEL/FWL					
	FSL/FNL	FEL/FWL					
	FSL/FNI	FEL/FWL					
	FSL/FNI	FEL/FWL					
	FSL/FN	FEL/FWL					
	FSL/FNI	LFEL/FWL					
	FSL/FN	LFEL/FWL					
	FSL/FN	LFEL/FWL					
	FSL/FN	LFEL/FWL					
	FSL/FN	LFEL/FWL					
	FSL/FN	LFEL/FWL					
	FSL/FN	LFEL/FWL					
	FSL/FN	LFEL/FWL		<u></u>			

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.

22054					
OPERATOR: License #	Well Location:S2Sec10Twp. 27S. R. 37East				
Name: XTO ENERGY INC. Address 1: 210 PARK AVENUE, SUITE 2350					
	CANARY				
Address 2: City: OKLAHOMA CITY State: OK Zip: 73102 +					
Contact Person: BRENDA WALLER	the lease below:				
Phone: (919-3259 Fax: ()	10210 10001111022 01011219				
Email Address: BRENDA_WALLER@XTOENERGY.COM					
:mail Address:					
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:	* * * * * * * * * * * * * * * * * * *				
4uuress 2,	- County, and are are property				
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				
State: Zip:+ If this form is being submitted with a Form C-1 (Intent) or CB-1 the KCC with a plat showing the predicted locations of lease road are preliminary non-binding estimates. The locations may be ent	(Cathodic 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 of the KCC with a plat showing the predicted locations of lease road are preliminary non-binding estimates. The locations may be entitled Select one of the following: X I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or we CP-1 that I am filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number I have not provided this information to the surface owner I have not provided this information to the surface owner I have not provided this information to the surface owner I have not provided this information to the surface owner I have not provided this information to the surface owner I have not provided this information to the surface owner I have not provided this information to the surface owner I have not prov	(Cathodic Protection Borehole Intent), you must supply the surface owners and ds, tank batteries, pipelines, and electrical lines. The locations shown on the plat tered 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 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 refax, and email address. Testing 1. Lacknowledge that, because I have not provided this information, the face owner(s). To mitigate the additional cost of the KCC performing this				
City: State: Zip: + If this form is being submitted with a Form C-1 (Intent) or CB-1 of the KCC with a plat showing the predicted locations of lease road are preliminary non-binding estimates. The locations may be entioned to select one of the following: X I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or work CP-1 that I am filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number I have not provided this information to the surface owner KCC will be required to send this information to the surface will be required to send this information to the surface will be required to send this information to the surface.	(Cathodic Protection Borehole Intent), you must supply the surface owners and ds, tank batteries, pipelines, and electrical lines. The locations shown on the plat tered 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 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 refax, and email address. P(s). I acknowledge that, because I have not provided this information, the face owner(s). To mitigate the additional cost of the KCC performing this andling fee, payable to the KCC, which is enclosed with this form.				
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Surface Owners

API#: 150672	02730000	Lease Name: CANA	RY	Well	# <u>12</u>
Owner Name:	LEHMANN, ROBERT	ALLEN			
	4012 BRICK CHURCI				
	NASHVILLE	State: TN	Zip:	37207	
City.		302 00	•		
Owner Name	SIEBERT, JAKE L. &	CVNTHIA			
		CHAITIA			
Address:	1073 E RD 5				
City:	ULYSSES	State: KS	Zip:	67880	
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
City.			·		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		