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## 081514\_CharlesHoffman\_3INF.pdf

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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,

Form KSONA-1, Certification of Compliance will  MUST be submitte	th the Kansas Surface Owner Houndard 1795 ad with this form.
Check Applicable Boxes:	Effective Date of Transfer: 8/15/2014
Oil Lease: No. of Oil Wells**	
Gas Lease: No. of Gas Wells**	KS Dept of Nevertue Lease 140
Gas Gathering System:	Lease Name: CHARLES HOFFMAN
Saltwater Disposal Well - Permit No.:	NE_Sec. 7 Twp. 27 R. 35W EXW
Spot Location: feet from N / S Line	Legal Description of Lease:
feet from E / W Line	T027S - R035W: SEC 007 All
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	
Number of Injection Wells**	County: Grant
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
** Side Two Must Be Completed.	Injection Zone(s):
	feet from N / S Line of Section
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	
Type of Pit: Emergency Burn Settling	Haul-Off
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	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: WGP-KHC LLC
	Date: 08/15/2014
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature:
	has been
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
Permit No.: Recommended action:	permitted by No.:
Permit No.:	【副2449年   李田俊   李
	Date:
Date:	Authorized Signature
-m 11-18-14	PRODUCTION NOV 1 9 2014 UIC NUV 1 9 711 4
Mail to: Past OperatorNew Opera	ator District
	18 th Varian 67202

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#### Side Two

#### Must Be Filed For All Wells

ease Name:	CHARLES HOFFMAN		* Location: 7 2	27 35WNE	
well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet from	Section Line om South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
INF	15067213110000 /	3725FSL	1250FEL	Н	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		<u> </u>
		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		
		FSL/FNI	FEL/FWI		
		FSL/FNI	FEL/FWI		
		FSL/FN	FEL/FWI		
		FSL/FN	LFEL/FW		
		FSL/FN	LFEL/FW		
		FSL/FN	LFEL/FW		
		FSL/FN	LFEL/FW	L	

A separate sheet may be attached if necessary

<sup>\*</sup> 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.

22004	Well Location:
PERATOR: License # 32864  TO ENERGY INC.	NE Sec. 7 Twp. 27 S. R. 35 East West
ame: XTO ENERGY INC.  ddress 1: 210 PARK AVENUE, SUITE 2350	G Grant
	CHARLES HOFFMAN MAGIL #43 INF
ddress 2:	
ontact Person: BRENDA WALLER	st I
ontact Person:	
hone: (	
mail Address:	
urface Owner Information:	
lame: See Attached	When filing a Form T-1 involving multiple surface owners, attach an additiona sheet listing all of the information to the left for each surface owner. Surface
ddress 1:	sheet listing an of the michigan the records of the register of deeds for the
ddress 2:	county, and in the real estate property tax records of the county treasurer.
<b></b> -	
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	(Cathodic Protection Borehole Intent), you must supply the surface owners and
f 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
f 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 entitled to be select one of the following:    X	(Cathodic Protection Borehole Intent), you must supply the surface owners and ds, tank batteries, pipelines, and electrical lines. The locations shown on the platered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted lotice 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 e form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
f 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 entirely select one of the following:  X   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 filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number	(Cathodic Protection Borehole Intent), you must supply the surface owners and ds, tank batteries, pipelines, and electrical lines. The locations shown on the platered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted lotice 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 e form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
f 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 entire preliminary non-binding estimates. The locations may be entired to be sufficient 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 with 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 owner task, I acknowledge that I am being charged a \$30.00 have the surface of the the surfa	(Cathodic Protection Borehole Intent), you must supply the surface owners and ds, tank batteries, pipelines, and electrical lines. The locations shown on the plattered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted liotice 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 e form being filed is a Form C-1 or Form CB-1, the plat(s) required by this ir, fax, and email address.  r(s). I acknowledge that, because I have not provided this information, the frace owner(s). To mitigate the additional cost of the KCC performing this handling fee, payable to the KCC, which is enclosed with this form, the KSONA-translating fee with this form.
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 entered to be a common 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 worker (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 when task, I acknowledge that I am being charged a \$30.00 h	(Cathodic Protection Borehole Intent), you must supply the surface owners and ds, tank batteries, pipelines, and electrical lines. The locations shown on the plattered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Idotice 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 e form being filed is a Form C-1 or Form CB-1, the plat(s) required by this ir, fax, and email address.  If (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 handling fee, payable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-form CP-1 will be returned.

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

## **Surface Owners**

AUG 20 2014 **KCC WICHITA** 

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API#: <u>150672</u>	13110000	Lease Name: CHARLES H	OFFMAN	Well # <u>3 INF</u>	
Owner Name:	DETRO RICHARD &	RITA FAMILY PTNSP LTD			
Address:	112 EGRET COVE				
	GEORGETOWN	State: TX	Zip: 78633		
City.					
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:		