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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 submitte	
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.: 200742
Gas Gathering System:	Lease Name: CITIZENS STATE BANK
Saltwater Disposal Well - Permit No.:	SW Sec. 10 Twp. 33 R. 36W F XW
Spot Location: feet from N / S Line feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T033S - R036W: SEC 010 All
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. If Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling	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
	Phone: 405-319-3259
Past Operator's Name & Address: XTO ENERGY INC.	00/45/2044
210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102	Date: US/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: ONEOK FIELD SERVICES
OUT HAVE Subject, Guille Grown Industrial, 1997	Date: 08/15/2014
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titzwater
	authorization surface nit nermit # has been
Acknowledgment of Transfer: The above request for transfer of injection anoted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation
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
12-3-14	PRODUCTION DEC 0 4 2014
DISTRICT EPH 7 32 7 7  Mail to: Past Operator New Operat	Printed and the second

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#### Side Two

#### Must Be Filed For All Wells

' Lease Name:	CITIZENS STATE BANK		* Location: 10	33 36WSW	
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)
	15189003710000 🗸	2310FSL	2970FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	(1987년) - 1987년 - 1987년 - 1987년 - 1987년 - 1987	
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		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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.

32864	Well Location:
OPERATOR: License # 32864 Name: XTO ENERGY INC.	
Name:XTO ENERGY INC. Address 1:210 PARK AVENUE, SUITE 2350	County-Stevens
Address 2:	CITIZENS STATE BANK MAGE #-1
City: OKLAHOMA CITY State: OK Zip: 73102 +	
Contact Person: BRENDA WALLER	
Phone: ( 405 319-3259 Fax: ()	10000 11000011
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 treasurer.
Address 2: State: Zip:+  If this form is being submitted with a Form C-1 (Intent) or CB-1 (Intent) or	county, and in the real estate property tax records of the county treasurer.  (Cathodic Protection Borehole Intent), you must supply the surface owners and its tank batteries, pipelines, and electrical lines. The locations shown on the plat
Address 2: State: Zip:+  If this form is being submitted with a Form C-1 (Intent) or CB-1 (Intent) or	county, and in the real estate property tax records of the county treasurer.  (Cathodic Protection Borehole Intent), you must supply the surface owners and the tank batteries, pipelines, and electrical lines. The locations shown on the plat
Address 2:  City: 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 enti  Select one of the following:  X   Certify that, pursuant to the Kansas Surface Owner No.	Cathodic Protection Borehole Intent), you must supply the surface owners and is, tank batteries, pipelines, and electrical lines. The locations shown on the plat ered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Otice Act (House Bill 2032), I have provided the following to the surface rill be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form a form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
Address 2: 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 enti  Select one of the following:  X I certify that, pursuant to the Kansas Surface Owner No owner(s) of the land upon which the subject well is or w CP-1 that I am filing 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	Cathodic Protection Borehole Intent), you must supply the surface owners and is, tank batteries, pipelines, and electrical lines. The locations shown on the plat ered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Otice Act (House Bill 2032), I have provided the following to the surface rill be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form a form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
Address 2: 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 enti  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 w 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 in the surface of the surface owner and the content of the surface owner in the surface owner	Cathodic Protection Borehole Intent), you must supply the surface owners and its, tank batteries, pipelines, and electrical lines. The locations shown on the plat ered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Totice Act (House Bill 2032), I have provided the following to the surface rill 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 fax, and email address.  (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.
Address 2: 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 ente  Select one of the following:  X   Certify that, pursuant to the Kansas Surface Owner No owner(s) of the land upon which the subject well is or w CP-1 that 1 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 has	Cathodic Protection Borehole Intent), you must supply the surface owners and is, tank batteries, pipelines, and electrical lines. The locations shown on the plat ered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Otice Act (House Bill 2032), I have provided the following to the surface rill be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form & form being filed is a Form C-1 or Form CB-1, the plat(s) required by this; fax, and email address.  (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.  If the fee is not received with this form, the KSONA-1 and improved the best of my knowledge and belief.

### **Surface Owners**

API#: 151890	003710000	Lease Name: CITIZENS ST	TATE BANK	Well # <u>1</u>
Owner Name:	PASSMORE, CARLIS	SJ&LYNDA K		
Address:	PO BOX 836			
City:	HUGOTON	State: KS	Zip: 67951-0836	
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:	