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: 8/15/2014 Oil Lease: No. of Oil Wells Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: Gas Gathering System: Lease Name: COMBES B Saltwater Disposal Well - Permit No.: _ 12 Twp. 32 R NW_Sec. _ _ feet from N / S Line Legal Description of Lease: feet from | E / | W Line T032S - R035W: SEC 012 NE4 NE4, W2 NE4, SE4 NE4, NE4 Enhanced Recovery Project Permit No.: SE4, S2 SE4, NW4 SE4, SW4, NW4 Entire Project: Yes No Number of Injection Wells County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s):_ ** Side Two Must Be Completed. Injection Zone(s): Surface Pit Permit No.: N / S Line of Section (API No. If Drill Pit, WO or Haul) E / W Line of Section feet from Type of Pit: Bum Settling Haul-Off Workover **Emergency** 144 32864 **BRENDA WALLER** Past Operator's License No. Contact Person: Past Operator's Name & Address: XTO ENERGY INC. Phone: 405-319-3259 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102 08/15/2014 Tim Welch Vice President-Land Signature: New Operator's License No. 33999 / **NANCY FITZWATER** 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 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. 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 ___ . Recommended action: _ permitted by No.: _ Date: Authorized Signature Authorized Signature DISTRICT -Mail to: Past Operator_

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 220294						
* Lease Name: COMBES B		* Location: 12 32 35		2 32 35WNW	35WNW		
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)	
B13 INF	15189208640001	660FNL	660FWL	н		ACTIVE	
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		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.

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.

Select the corresponding form being flied C-1 (intent)	CB-1 (Cathodic Protection Borehole Intent)				
OPERATOR: License # 32864	Well Location:				
Name: XTO ENERGY INC.	NW Sec. 12 Twp. 32 S. R. 35 East West				
Address 1: 210 PARK AVENUE, SUITE 2350	County:Stevens				
Address 2:	Lease Name: COMBES B Well #: B13 INF				
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of				
Contact Person: BRENDA WALLER	the lease below: T032S - R035W: SEC 012 NE4 NE4, W2 NE4, SE4 NE4, NE4				
Phone: (405 319-3259 Fax: ()	SE4, S2 SE4, NW4 SE4, SW4, NW4				
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				
Address 1:					
Address 2:					
City:	·				
are preliminary non-binding estimates. The locations may be ent Select one of the following:	ds, tank batterles, 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.				
I certify that, pursuant to the Kansas Surface Owner Noowner(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.	r(s). I acknowledge that, because I have not provided this information, the				
KCC will be required to send this information to the surf task, I acknowledge that I am being charged a \$30.00 ha	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 choosing the second option, submit payment of the \$30.00 has form and the associated Form C-1, Form CB-1, Form T-1, or Form CB-1, Form CB-1, Form T-1, or Form CB-1, Form CB-1, Form T-1, or Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form CB-1, Form	andling fee with this form. If the fee is not received with this form, the KSONA-1 rm CP-1 will be returned.				
I hereby certify that the statements made herein are true and con					
Date: Signature of Operator or Agent:	Walch Title: Vice President-Land				
API # :15189208640001 KDOR #22					

Surface Owners

API#: 15189208640001		Lease Name: COMBES B			Well # <u>B13 INF</u>
Owner Name:	HOLT, ROBERT RAY	•			
Address:	2698 ROAD V				
City:	MOSCOW	Sta	te: KS	Zip: 67952-5242	
Owner Name:					
Address:					
City:		Sta	te:	Zip:	
Owner Name:					
Address:					
City:		Stat	te:	Zip:	
Owner Name:					
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