### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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.: 200748
Gas Gathering System:	Lease Name: COOK
Saltwater Disposal Well - Permit No.:	NE Sec. 22 Twp. 28 R. 34W EXW
Spot Location: feet from N / S Line	Legal Description of Lease:
feet from E / W Line	T028S - R034W: SEC 022 NE4, SE4, SW4, NW4
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	
Number of Injection Wells**	County: Haskell
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)	보고 하느러 시네 시 블리즘 이쁘게 하느 때 그
Type of Pit: Emergency Burn Settling	Haul-Off   Workover   Drilling 人人
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: ONEOK FIELD SERVICES
	Date: 08/15/2014
	040 275
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature:
Acknowledgment of Transfer: The above request for transfer of injection of	
그는 그래도 가게 하는 다리를 다 가득하는 것이 가득하는 것이 되었다. 그리고 말했다면서 그래요?	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the a	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.:
Date:	Date:
Authorized Signature	NOV 2.5 7014 NOV 0.5 9014
Diolituo.	PRODUCTION OIGHOUTE
Mail to: Past Operator New Operator	or District

#### Side Two

#### Must Be Filed For All Wells

* Lease Name: COOK		* Location: 22 28 34WNE			
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fi	Section Line rom South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15081002820000 /	2840 FSL 2640ESL	2440 FEL 2640FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
	] - 1	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/FNL	FEL/FWL		
	발발 - 원래 - 발 - 호텔 - <del>원래</del>	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL			
		FSL/FNL			
		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.

#### 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 filed: C-1 (Intent) CB-	1 (Cathodic Protection Borehole Intent)
OPERATOR: License #	_ Well Location:
Name: XTO ENERGY INC.	NE Sec. 22 Twp.28 S. R. 34 East West
Address 1: 210 PARK AVENUE, SUITE 2350	County: Haskell
Address 2:	Lease Name: COOK Well #:1
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: T028S - R034W: SEC 022 NE4, SE4, SW4, NW4
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
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:	and a seed in the small extent numbers to a record of the example transcriper
City:	-
are preliminary non-binding estimates. The locations may be entered Select one of the following:	ank batteries, pipelines, and electrical lines. The locations shown on the plat If 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 Notice     owner(s) of the land upon which the subject well is or will be	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this , and email address.
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ing fee, payable to the KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 handli form and the associated Form C-1, Form CB-1, Form T-1, or Form C	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.
I hereby certify that the statements made herein are true and correct	
Date: Signature of Operator or Agent: Tim OVE	Titte: Vice President-Land
API # :15081002820000 KDOR #20074	

## **Surface Owners**

API#: 150810	002820000	Lease Name: COOK		Well # <u>1</u>
Owner Name:	SPRUNGER, LOGA	N &NITALEEN		
Address:	443 RD 100			
City:	SATANTA	State: KS	Zip: 67870	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:		_	_	
City:		State:	Zip:	
One of the				
Owner Name:				
Address:			71	
City:		State:	Zip:	