RECEIVED AUG 20 2014 KCC WICHITA

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,

Check Applicable Boxes: MUST be submitte	
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 8/15/2014
Gas Lease: No. of Gas Wells***	KS Dept of Revenue Lease No.: 221125
Gas Gathering System:	Lease Name: G MCCULLEY
Saltwater Disposal Well - Permit No.:	NW_Sec. 15_Twp. 32_R. 35W FXW
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T032S - R035W: SEC 015 NW4, NE4, SE4, SW4
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):
	feet from N / S Line of Section
Surface Pit Permit No.:(API No. if Drift Pit, WO or Haul)	
Type of Pit: Emergency Burn Settling	
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
Title: Vice President-Land	Signature: Tim Welch
Tine:	Styliature.
New Operator's License No. 33999 V	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
Title:REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Trizvator
Title: REGULATORY COMPLIANCE SUPERVISOR	Osgranie.
Acknowledgment of Transfer: The above request for transfer of injection a	authorization surface pit permit # has been
noted, approved and duly recorded in the records of the Kansas Corporation C	
Commission records only and does not convey any ownership interest in the a	
Continues on records only and does not convey any owner and accept an are	
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	
Permit No.: Recommended action:	permitted by No.:
Date:	Date:
12-2-14-	PRODUCTION DEC 0 4 2014 DEC 0 4 2014
DISTRICT EPR / S - S - S - S - S - S - S - S - S - S	

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Side Two

Must Be Filed For All Wells

*Lanca Name	CMCCULLEY			5 32 35WNW	
* Lease Name: Well No.	API No. Footage from Section Line (YR DRLD/PRE '67) (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
A13 INF	15189209970001 🗸	660FNL	1320FWL	H	ACTIVE
		OOUTIL	132UF#VL		
		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		
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		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL	ing sa	
		FSL/FNL	FEL/FWL		
		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		e <u>la presencia de la Constancia.</u> La professión de la Constancia de la Const
		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.

RECEIVED AUG 20 2014 **KCC WICHITA**

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.

OPERATOR: License # 32864	Well Location:			
Name: XTO ENERGY INC.	NW Sec. 15 Twp. 32 S. R. 35 East West			
Address 1: 210 PARK AVENUE, SUITE 2350				
Address 2:	CMCCHILEV			
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below:			
Contact Person: BRENDA WALLER				
Phone: (405 319-3259 Fax: ()	T032S - R035W: SEC 015 NW4, NE4, SE4, SW4			
Email Address: BRENDA_WALLER@XTOENERGY.COM	_			
Surface Owner Information:				
Name: See Attached	=			
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:				
City:	_			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cat	thodic Protection Borehole Intent), you must supply the surface owners and			
the KCC with a plat showing the predicted locations of lease roads, to	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered Select one of the following: X 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 to located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this			
the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered Select one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface	e Act (House Bill 2032), I have provided the following to the surface to located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this			
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Surface Owners

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API#: <u>15189</u> 2	209970001	Lease Name: G MCCULLEY		Well # <u>A13 INF</u>
Address:	MCCULLEY, MICHAE 2549 ROAD V MOSCOW	EL State: KS	Zip: 67952-5239	
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:	