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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,

Check Applicable Boxes: MUST be submit	ited with this form.				
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:				
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 208437				
Gas Gathering System:	Lease Name: GALL				
Saltwater Disposal Well - Permit No.:					
Spot Location: feet from N / S Line feet from E / W Line	Legal Description of Lease:				
Enhanced Recovery Project Permit No.:	T027S - R037W: SEC 009 All				
Entire Project: Yes No					
Number of Injection Wells **	County: Grant				
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE				
** Side Two Must Be Completed.	Injection Zone(s):				
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section				
	feet from E / W Line of Section				
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KĤ				
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	0045004				
Vice Bresident Land	Date:				
Title: Vice President-Land	Signature:				
igai (no company) de la California de La C Estada ante la company de la California de					
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				
	000 200				
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature:				
Acknowledgment of Transfer: The above request for transfer of injection a					
and the first of t	Commission. This acknowledgment of transfer pertains to Kansas Corporation				
Commission records only and does not convey any ownership interest in the a	ibove 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	Authorized Signature				
	PRODUCTION NOV 1 9 2014 UIC V 1 9 7014				
Mail to: Past Operator New Operato	rDistrict				

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Side Two

Must Be Filed For All Wells

* Lease Name:	GALL		* Location: 9	27 37WS2	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet t	n Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
B12	15067202710000 /	/277 1 320 FSL	2760 2640 FEL	GAS	ACTIVE
		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	et gant en	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	e <u>din o seto.</u> O Sana o perili	<u> </u>
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
<u> </u>		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.

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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.

22064				
OPERATOR: License # 32864	Well Location:	- days frances		
Name: XTO ENERGY INC.		27 S. R. 37 East West		
Address 1: 210 PARK AVENUE, SUITE 2350	•			
Address 2:		Well #:B12		
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description			
Contact Person: BRENDA WALLER	the lease below: T027S - R037W: SEC 009 All			
Phone: (405 319-3259 Fax: ()				
Email Address: BRENDA_WALLER@XTOENERGY.COM	_			
Surface Owner Information:				
Name: See Attached		le 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:				
City: State: Zip:+	_			
the KCC with a plat showing the predicted locations of lease roads, t are preliminary non-binding estimates. The locations may be entered Select one of the following:	d on the Form C-1 plat, Form CB-1 plat, or	a separate plat may be submitted.		
X I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will b CP-1 that I am filing in connection with this form; 2) if the for form; and 3) my operator name, address, phone number, fax	e located: 1) a copy of the Form C-1, ForI m being filed is a Form C-1 or Form CB-1,	m CB-1. Form T-1. or Form		
I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handl	owner(s). To mitigate the additional cost	of the KCC performing this		
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 rece P-1 will be returned.	rived with this form, the KSONA-1		
I hereby certify that the statements made herein are true and correct	to the best of my knowledge and belief.			
Date:8/15/2014 Signature of Operator or Agent:	loh Title:	ce President-Land		

Surface Owners

API#: <u>15067</u> 2	202710000	Lease Name: GALL		Well # <u>B12</u>	_
Owner Name:	GALL, ERNEST R TF	RUST			
Address:	2911 GREYLING DR				
City:	SAN DIEGO	State: CA	Zip: 92123		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner News					
Owner Name:					
Address: City:		State:	Zip:		
City.		State.	2 ι ρ.		
Owner Name:					
Address:					
City:		State:	Zip:		
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