## 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 Effective Date of Transfer: Oil Lease: No. of Oil Wells Gas Lease: No. of Gas Wells 208258 KS Dept of Revenue Lease No.: Gas Gathering System: Lease Name: GILLESPIE Saltwater Disposal Well - Permit No.: \_\_\_\_\_ 2 <sub>Twp.</sub> 32 <sub>R.</sub> 37W feet from N / S Line Legal Description of Lease: feet from | E / | W Line T032S - R037W: SEC 002 S2 NW4, SW4, SE4, S2 NE4 (NENE) Enhanced Recovery Project Permit No.: (NWNE) (NENW) (NWNW) Entire Project: Yes No Number of Injection Wells\_ County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE **COUNCIL GROVE** Production Zone(s): \*\* Side Two Must Be Completed. Injection Zone(s): N / S Line of Section Surface Pit Permit No.: \_ feet from (API No. If Drill Pit, WO or Haul) W Line of Section feet from Haul-Off Workover Drilling Settling Type of Pit: Emergency KH **BRENDA WALLER** Past Operator's License No. 32864/ 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 33999 / **NANCY FITZWATER** Contact Person: New Operator's License No. -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 Signature: Title: REGULATORY COMPLIANCE SUPERVISOR 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 of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by permitted by No.: \_ \_\_\_\_ . Recommended action: Date: Authorized Signature Authorized Signature DISTRICT -Mail to: Past Operator\_ **New Operator** 

#### Side Two

#### Must Be Filed For All Wells

	GILLESPIE			32 37WNW	
* Lease Name:			Location: 2		<u>ing Paul (n. 1911)</u> Mina All II
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)
12	15189201410000 🗸	3550FSL	4030FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		ing <u>ang</u> pada bandan pada bandan Tilihini Tilihingan bandan bandan pada
		FSL/FNL 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/FNLFSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FELFWL		
		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.

API#:15189201410000

#### 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.

Contact Person: BRENDA WALLER    Phone: ( 405    319-3259	CB-1 (Cathodic Protection Borehole Intent)	Select the corresponding form being filed: C-1 (Intent) CB-	
Address 1: 210 PARK AVENUE, SUITE 2350  Address 2: Lease Name: GILLESPIE Well #:1-2  City: OKLAHOMA CITY State: OK Zip: 73102 + If filing a Form 7-1 for multiple wells on a lease, enter the legal of the Interest below: T0325 - R037W: SEC 002 S2 NW4, SW4, SE4, S2 NE4 (NENE)  Phone: ( 495 319-3259 Fax: ( ) ) (NWNE) (NENW) (NWNW)  Surface Owner Information:  Name: See Attached When filing a Form 7-1 invoking multiple surface owners attach sheel listing all of the information to the left for each surface owner information: and in the real estate property tax records of the register of county, and in the real estate property tax records of the county to the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be Select one of the following:			
Address 2:  City: OKLAHOMA CITY   State: OK   Zip: 73102.+   If filing a Form T-1 for multiple wells on a lease, enter the legal of the lease below:  To235 - Ro37W: SEC 002 S2 NW4, SW4, SE4, S2 NE4 (NENE)  Phone: ( 405 319-3259   Fax: (		radine,	
City: OKLAHOMA CITY State: OK Zip: 73192.+ If fling a Form 7-1 for multiple wells on a lease, enter the legal in the lease below.  Togs2- R037W: SEC 002 \$2 NW4, \$W4, \$E4, \$2 NE4 (NENE) (NWNE) (NENW) (NENW) (NENW)  Surface Owner Information:  See Attached When filing a Form 7-1 involving multiple surface owners, attach sheet listing all of the information to the left for each surface owner information can be found in the records of the register of country. and in the residestate property tax records of the country to country and in the residestate property tax records of the country to the following:  If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface of the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be Select one of the following:  X   Certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032).   have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or CP-1 that I am filling in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by form; and 3) my operator name, address, phone number, fax, and email address.  If the one of provided this information to the surface owner(s). I acknowledge that, because I have not provided this information KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performic task, I acknowledge that I am being charged a \$30.00 handling fee, pushle to the KCC, which is enclosed with this form, the form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.  If thereby certify that the statements made herein are true and correct to	OILL EODIE		
Contact Person: BRENDA WALLER Phone: ( 405 \$19-3259			
Phone: (_405_3)=3259	the lease below:	Contact Person: BRENDA WALLER	
Surface Owner Information:  Name: See Attached			
Name: See Attached  Address 1:			
Name: See Attached  Address 1:		Surface Owner Information	
Address 1:	Mhan filing a Form T1 involving multiple surface owners, attach an additional	0 14 - 1 - 1	
Address 2:	sheet listing all of the information to the left for each surface owner. Surface		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface of the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be Select one of the following:  X   Certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Incomplete the following to the surface owner(s) of the land upon which this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by form; and 3) my operator name, address, phone number, fax, and email address.  I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information to the surface owner(s). To mitigate the additional cost of the KCC performing task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.  If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.	owner unormation can be round in the records of the register of deeds for the		
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KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.  If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.  I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.	will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ne form being filed is a Form C-1 or Form CB-1, the plat(s) required by this	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	
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	nandling fee with this form. If the fee is not received with this form, the KSONA-1 orm CP-1 will be returned.	If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form C	
<u>.</u>	orrect to the best of my knowledge and belief.	I hereby certify that the statements made herein are true and correct	
Date: Signature of Operator or Agent: Titte: Vice President-Land	Welch Title: Vice President-Land	Date: Signature of Operator or Agent: Well	

**KDOR #208258** 

### **Surface Owners**

API#: <u>151892</u>	201410000	Lease Name: GILLESPIE		Well # <u>12</u>
Owner Name:	GILLESPIE, F E			
Address:	2030 STATE HIGHW	AY 25		
City:	HUGOTON	State: KS	Zip: 67951-8914	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
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City:		State:	Zip:	
Owner Name:				
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City:		State:	Zip:	