RECEIVED AUG 20 2014 KCC WICHITA

## 081514\_GlennE\_Dew\_1.pdf

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

Gas Lease: No. of Gal Wells 1 **  Gas Cathering System:  Sailwater Disposal Well - Permit No.:  Spot Location: feet from N / S Line feet from E / W Line  Enhanced Recovery Project Permit No.:  Entire Project: Yes No Number of Injection Wells **  Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE  Surface Pit Permit No.:  (API No. II Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling K L  Past Operator's License No. 32864 / Contact Person: BRENDA WALLER  Past Operator's License No. 33999 / Contact Person: NANCY FITZWATER	Check Applicable Boxes: MUST be subm.	itted with this form.
Gas Gathering System:    Salkhater Disposal Well - Permit No.:   Spot Location:   leet from   N /   S Line   leet from   R /   W	ing the Ballah Malian and a salar and a	
Lease Name: Settwater Disposal Well - Permit No.:   Spot Location:   Set from   N /   S Line   Set from   E /   W Line   Set from   E /   W Line   Set from   E /   W Line   Legal Description of Lease:   T927S - R935W: SEC 904 All	X Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 200871
Salwater Disposal Well - Permit No.:	Gas Gathering System:	Lease Name: GLENN E DEW
Legal Description of Lease: To275 - R038W: SEC 094 All	Saltwater Disposal Well - Permit No.:	
T0275 - R035W: SEC 004 All	Spot Location: feet from N / S Line	
Entire Project:   Yes   No Number of Injection Wells   Tible:   REGULATORY COMPLIANCE SUPERVISOR   Now Operator and may continue to inject fluids as authorized by Permit No:   Security of the above injection authorization, surface pit permit # has been noted, approved and duty recorded in the records of the Kansas Corporation Commission records only and does not corvey any ownership interest in the above injection of Note;   Security on the surface pit permit #   Note   Not	feet from DE / W Line	
Number of Injection Wells  Fleld Name: COMBINED HUGOTON PANOMA COUNCIL GROVE  **Side Two Must Be Completed.**  Surface Pit Permit No:	Enhanced Recovery Project Permit No.:	102/S - R035W: SEC 004 All
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE  **Side Two Must Be Campleted.**  Surface Pit Permit No.:	Entire Project: Yes No	
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE  ### SIde Two Must Be Completed  Surface Pit Permit No.:    (API No. of Drift Pit, WC or Hear)   feet from	Number of Injection Wells **	County: Grant
Surface Pit Permit No.:    Surface Pit Permit No.:   Surface Pit Permi	Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	All tales and figure to the control of the first of the control of the control of the control of the control of
Set No.   Carl Pit, Woor Haul)   Set from   E /   W Line of Section   Type of Pit.   Emergency   Bum   Settling   Haul-Off   Workover   Drilling   K-4	** Side Two Must Be Completed.	
Set No.   Carl Pit, Woor Haul)   Set from   E /   W Line of Section   Type of Pit.   Emergency   Bum   Settling   Haul-Off   Workover   Drilling   K-4	Surface Dit Dermit No.	
Type of Pit: Emergency Bum Settling Haul-Off Workover Drilling K4  Past Operator's License No. 32864 / Contact Person: BRENDA WALLER  Past Operator's Name & Address: XTO ENERGY INC. Phone: 405-319-3299  210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102  Title: Vice President-Land Signature: William Official Signature: Signature: William Official Signature: Signatur		
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 2360, OKLAHOMA CITY, OK 73102  Date: 08/15/2014  Signature: ManCY FITZWATER  Phone: 281-840-4000  Oil / Gas Purchaser: WGP-KHC LLC  Date: 08/15/2014  Signature: WGP-KHC LLC  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  Signature: WGP-KHC LLC  Date: 08/15/2014  Signature: MGP-KHC LLC  Date: 08/15/2014  Signature: 28/18/18/18/18/18/18/18/18/18/18/18/18/18		
Past Operator's Name & Address: XTO ENERGY INC.  210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73192  Title: Vice President-Land  Signature: Signature: Signature: Signature: NanCy FITZWATER  New Operator's License No. 33999 / Contact Person: NanCy FITZWATER  New Operator's Name & Address: LINN OPERATING, INC.  600 Travis Street, Suite \$100 Houston, TX 77002 Oil / Gas Purchaser: WGP-KHC LLC  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR Signature: Signature	lype of Pit: Emergency Burn Settling	_ Haul-Off _ Workover _ Drilling κ ң
210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102  Title: Vice President-Land  Date: 08/15/2014  Signature: Time Wich  New Operator's License No. 33999  Contact Person: NANCY FITZWATER  Phone: 281-840-4000  Oil / Gas Purchaser: WGP-KHC LLC  Date: 09/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  Signature: Hospital Signature  Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # has been noted, approved and duly recorded in the records of the 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 Permit No: Recommended action: Date: Authorized Signature  Date: Authorized Signature  District EPR 1-18-14 PRODUCTION NOV 1 9 2014  NOV 1 9 2014  NOV 1 9 2014	Past Operator's License No. 32864 /	Contact Person: BRENDA WALLER
Title: Vice President-Land  Signature: Tim Wideh  New Operator's License No. 33999 / 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: WGP-KHC LLC  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR Signature: Signature: Signature: Has been 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 Permit No: Recommended action: Permit No: Authorized Signature  Date: Authorized Signature  District Production NOV 1 9 2014 WOV 1 9 2014	Past Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259
Title: Vice President-Land  Signature: Tim Widek  New Operator's License No. 33999 / Contact Person: NANCY FITZWATER  New Operator's Name & Address: LINN OPERATING, INC. Phone: 281-840-4000  Oil / Gas Purchaser: WGP-KHC LLC  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  Signature: Namey Figurator  Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # has been noted, approved and duly recorded in the records of the 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 Permit No.: Recommended action: Date: Authorized Signature  Date:	210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102	Date: 08/15/2014
New Operator's License No. 33999 / Contact Person: NANCY FITZWATER  New Operator's Name & Address: LINN OPERATING, INC. Phone: 281-840-4000  600 Travis Street, Suite \$100 Houston, TX 77002 Oil / Gas Purchaser: WGP-KHC LLC  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR Signature: Management of Transfer: The above request for transfer of injection authorization, surface pit permit # has been noted, approved and duly recorded in the records of the 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 Permit No: Recommended action: Date: Authorized Signature    Date: Authorized Signature   Date: Authorized Signature   Date: Authorized Signature   Authorized Signature   Date: Authorized Signatur	Title Vice President-Land	Tim Wolch
New Operator's Name & Address: LINN OPERATING, INC.  Phone:		Signature:
New Operator's Name & Address: LINN OPERATING, INC.  Phone:		
Oil / Gas Purchaser: WGP-KHC LLC  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  Signature: Manage Fitgmater  Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #	New Operator's License No33999 '	Contact Person: NANCY FITZWATER
Date:	New Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4000
Date:	600 Travis Street, Suite 5100 Houston, TX 77002	Oil / Gas Purchaser: WGP-KHC LLC
Title: REGULATORY COMPLIANCE SUPERVISOR  Signature: Sig		
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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.	Title: REGULATORY COMPLIANCE SUPERVISOR	Signature:
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Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.	그 사람들은 사람들은 사람들은 사람들은 사람들은 사람들이 가는 사람들이 되었다.	
is acknowledged as the new operator and may continue to inject fluids as authorized by  Permit No.:		그리고 있는 사람들이 가는 사람들이 모든 사람들이 가는 사람들이 가는 사람들이 되었다. 그 사람들이 되었다.
the new operator and may continue to inject fluids as authorized by  Permit No.: Recommended action:  Date:	Commission records only and does not convey any ownership interest in the	above injection well(s) or pit permit.
the new operator and may continue to inject fluids as authorized by  Permit No.: Recommended action:  Date:	is acknowledged as	is acknowledged as
Permit No.:		
Date:		
Authorized Signature  DISTRICT EPR //-/8-/4 PRODUCTION NOV 1 9 2014 UNOV 1 9 2014	Permit No.:	permitted by No.:
Authorized Signature         Authorized Signature           DISTRICT         EPR //-/8-/4         PRODUCTION NOV 1 9 2014         UNOV 1 9 2014		
DISTRICT EPR //-/8-/4 PRODUCTION NOV 1 9 2014 UNOV 1 9 2014		
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#### Side Two

### Must Be Filed For All Wells

' Lease Name:	GLENN E DEW		* Location: 4	27 35WSE	
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)
1	15067002750000	2310FSL~	2310FEL	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		<u> </u>
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		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	o <u>rio de la Calda</u> La Calda de La Calda	
		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.

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API #:15067002750000

## 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 #32864	Well Location:			
Name: XTO ENERGY INC.				
Address 1: 210 PARK AVENUE, SUITE 2350				
Address 2:	OLEMNIE DEW			
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: T027S - R035W: SEC 004 All			
Contact Person: BRENDA WALLER				
Phone: ( 405 319-3259 Fax: ()	102/5 - R035W: SEC 004 All			
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:	county, and in the real estate property tax records of the county treasurer.			
City: State: Zip: +				
the KCC with a plat showing the predicted locations of lease roads, tal are preliminary non-binding estimates. The locations may be entered	odic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
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,				
	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this g fee, payable to the KCC, which is enclosed with this form.			
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 CF	g 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 t	to the best of my knowledge and belief.			
Date: Signature of Operator or Agent: Signature or	Title: Vice President-Land			

KDOR #200871

## **Surface Owners**

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API#: 1506700	2750000 Le	ase Name: _	GLENN E DEW		Well # 1
	,	_			
Owner Name: [	DEW FARMS INC				
Address: F	PO BOX 447				
City: \	JLYSSES	State	e: KS	Zip: 67880	
Owner Name:					
Address:					
City:		State	e:	Zip:	
Owner Name:					
Address:					
City:		State	e:	Zip:	
Owner Name:					
Address:					
City:		State	<b>:</b> :	Zip:	
Owner Name:					
Address:		<b>0.</b> .			
City:		State	2:	Zip:	
Owner Name:					
Address:					
		State	<b>.</b> .	Zip:	
City:		State	<b>:</b> •	دıp.	