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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, MUST be submitted with this form. Check Applicable Boxes: 8/15/2014 Oil Lease: No. of Oil Wells _ Effective Date of Transfer: 220292 Gas Lease: No. of Gas Wells _ KS Dept of Revenue Lease No.: Gas Gathering System: Lease Name: GREGG Saltwater Disposal Well - Permit No.: ___ 14_Twp._ 34 _{R.} 36W _ feet from N / S Line Legal Description of Lease: feet from E / W Line T034S - R036W: SEC 014 SE4, NE4, N2 NW4, S2 NW4, SW4 Enhanced Recovery Project Permit No.: _ Entire Project: Yes No Number of Injection Wells_ County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s): ** Side Two Must Be Completed. Injection Zone(s): Surface Pit Permit No.: feet from S Line of Section (API No. If Drill Pit, WO or Haul) W Line of Section feet from Haul-Off Type of Pit: Burn Settling Workover Emergency **BRENDA WALLER** 32864 Past Operator's License No. 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 Date: Tim Welch Vice President-Land Signature: New Operator's License No. 33999 **NANCY FITZWATER** Contact Person: 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 Date: Title: REGULATORY COMPLIANCE SUPERVISOR Signature: _ 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 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 _ . Recommended action: permitted by No.: _ Date: Authorized Signature Authorized Signature DEC DISTRICT. PRODUCTION

New Operator

Mail to: Past Operator

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Side Two

Must Be Filed For All Wells

| * Lease Name: _ | GREGG | | Location: 14 | 4 34 36WSE | | | |
|-----------------|--|---|--------------|-----------------------------------|---|--------------------------------------|----|
| 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 INF | 15189210830003 | 1650FSL | 330FEL ~ | Н | | ACTIVE | |
| | | | | | | | |
| | | FSL/FNL | FEL/FWL | | | | |
| | | FSL/FNL | FEL/FWL | | | | |
| | grade († 1865) 1904 - Herring Marie († 1864) 1804 - Harris († 1864) | FSL/FNL | FEL/FWL | | 1.1 | | |
| | A CAMPAGNA AND A CAMP | FSL/FNL | FEL/FWL | | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | | |
| | | FSL/FNL | FEL/FWL | | | | |
| | | FSL/FNL | FEL/FWL | | | | |
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| | | FSL/FNL FSL/FNL | FEL/FWL | | | | |
| | | FSUFNL | FEL/FWL | | | | i. |
| | | FSL/FNL | FEL/FWL | | na mana a Taman sasansa asa | | |
| | | FSL/FNL | FEL/FWL | | | | |
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| | | FSL/FNL | FEL/FWL | | <u> </u> | | |
| | | | | | | | |

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.

| Select the corresponding form being filed: C-1 (Intent) CE | 3-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application) | | | | |
|--|--|--|--|--|--|
| OPERATOR: License # | Well Location: | | | | |
| Name: XTO ENERGY INC. | SE _Sec. 14 _Twp. 34 _ S. R. 36East West | | | | |
| Address 1: 210 PARK AVENUE, SUITE 2350 | | | | | |
| Address 2: | Lease Name: GREGG Well #:12 INF | | | | |
| City: OKLAHOMA CITY State: OK Zip: 73102 + | | | | | |
| Contact Person: BRENDA WALLER | the lease below: T034S - R036W: SEC 014 SE4, NE4, N2 NW4, S2 NW4, SW4 | | | | |
| 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 county, and in the real estate property tax records of the county treasurer. | | | | |
| Address 2: | | | | | |
| City: | _ | | | | |
| | tank batteries, pipelines, and electrical lines. The locations shown on the plat ed 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 I | ce Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ix, 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 eowner(s). To mitigate the additional cost of the KCC performing this lling fee, payable to the KCC, which is enclosed with this form. | | | | |
| If choosing the second option, submit payment of the \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form | lling fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned. | | | | |
| I hereby certify that the statements made herein are true and correct | | | | | |
| Date: Signature of Operator or Agent: | Adda Title: Vice President-Land | | | | |
| API # :15189210830003 KDOR #22029 | 92 | | | | |

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Surface Owners

| API#: <u>15189210830003</u> | | Lease Name: GREGG | Well # <u>12 INF</u> | | |
|-----------------------------|------------------|--------------------------|----------------------|--|--|
| | | | | | |
| Owner Name: | THOMAS LOV TR, L | AVERN & JANICE TTEES | | | |
| Address: | 1270 N GRANT AVE | | | | |
| City: | LIBERAL | State: KS | Zip: 67901 | | |
| | | | | | |
| 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: | | | | | |
| Citv: | | State: | 7in· | | |