RECEIVED AUG 20 2014 KCC WICHITA

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form Y-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.

| New Operator's Name & Address: LINN OPERATING, INC.  600 Travis Street, Suite 5100 Houston, TX 77002  Oil / Gas Purchaser: ONEOK FIELD SERVICES  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  Signature: Wanney Trignator  Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #   | Check Applicable Boxes:  | tted with this form.   |
|--|--|--|
| Gas Gathering System:    Sahwater Disposal Well - Permit No:   Seet from   N /   S Line   Seet from   E /   W Line   Seet from   E /   W Line   Seet from   Seet from   E /   W Line   Seet from   Seet from   E /   W Line   SW Soc.   35 Twp.   31 R.   34W   E X W Legal Description of Lease:   T031S - R034W: SEC 035 SE4, N2, SW4   SEC 035 SE4, N | Oil Lease: No. of Oil Wells**  | Effective Date of Transfer: 8/15/2014                                      |
| Saltwaiter Disposal Well - Permit No.:   Spot Location:   lest from   N /   S Line   keet from   E /   W Line   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W: SEC 035 SE4, N2, SW4   Legal Description of Lease:   T0315 - R034W   | Gas Lease: No. of Gas Wells **   | KS Dept of Revenue Lease No.: 220710                                       |
| Spintured Disposal Well - Permit No:   | Gas Gathering System:  | Lease Name INGRAM  |
| Legal Description of Lease:  | Saltwater Disposal Well - Permit No.:  |  |
| Entire Project:   Yes   No Number of Injection Wells     Fleid Name: COMBINED HUGOTON PANOMA COUNCIL GROVE   Fleid Name: Combined Separative   Flore Council Zone(s): CHASE   Floodaction Zone(s): C     |  | Legal Description of Lease:  |
| Number of Injection Wells  | Enhanced Recovery Project Permit No.:  | 10315 - R034W: SEC 035 SE4, NZ, SW4  |
| Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE  **Side Two Must Be Completed*  Surface Pit Permit No::    APT No. # Onli Pit. WO or Haul)   feet from   N /   S Line of Section   | Entire Project: Yes No   |  |
| Surface Pit Permit No.:    CAPT NO. II DRIS PIT, WO or Haw)  | Number of Injection Wells***   | County: Seward   |
| Surface Pit Permit No.:  | Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE                            | Production Zone(s): CHASE  |
| feet from   E /   W Line of Section   Type of Pit:   Emergency   Burn   Settling   Haul-Off   Workover   Ortilling   K   | ** Side Two Must Be Completed.   |  |
| 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  Signature: Time OWdek  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: ONEOK FIELD SERVICES  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR Signature: Management of Transfer: The above request for transfer of injection authorization, surface pit permit #  |  |  |
| Past Operator's Name & Address: XTO ENERGY INC.  210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102  Title: Vice President-Land  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: ONEOK FIELD SERVICES  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  Acknowledgment of Transfer. The above request for transfer of injection authorization, surface pit permit #  | Type of Pit: Emergency Burn Settling   | ] Haul-Off ☐ Workover ☐ Drilling   |
| 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102  Title: Vice President-Land  New Operator's License No. 33999 / Contact Person: Nancy Fitzwater  New Operator's Name & Address: LINN OPERATING, INC.  600 Travis Street, Suite 5100 Houston, TX 77002  Oil / Gas Purchaser: ONEOK FIELD SERVICES  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  Signature: **Manage Magazater**  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:  | 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: ONEOK FIELD SERVICES  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR Signature: Signature: Manage Fitzgrader  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.  | Past Operator's Name & Address: XTO ENERGY INC.                              | Phone: 405-319-3259  |
| New Operator's License No33999 / Contact Person:NANCY FITZWATER  New Operator's Name & Address:LINN OPERATING, INC   | 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102                         | Date: 08/15/2014   |
| New Operator's Name & Address: LINN OPERATING, INC.  Phone:281-840-4000  Oil / Gas Purchaser:ONEOK FIELD SERVICES  Date:08/15/2014  Title:REGULATORY COMPLIANCE SUPERVISOR   | Title: Vice President-Land   | Tim Welch  |
| New Operator's Name & Address: LINN OPERATING, INC.  Phone:281-840-4000  Oil / Gas Purchaser: _ONEOK FIELD SERVICES  Date:08/15/2014  Title: _REGULATORY COMPLIANCE SUPERVISOR  Signature:   |  |  |
| Oil / Gas Purchaser: ONEOK FIELD SERVICES  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  Signature: Signature: Signature  Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #   | New Operator's License No  | Contact Person: NANCY FITZWATER  |
| Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  Signature: Signatu | New Operator's Name & Address: LINN OPERATING, INC.                          | Phone: 281-840-4000  |
| Date:  | 600 Travis Street, Suite 5100 Houston, TX 77002                              | Oil / Gas Purchaser: ONEOK FIELD SERVICES                                  |
| Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #  |  | 00/48/004  |
| 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: Nancy Fitzwator   |
| Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.   | Acknowledgment of Transfer: The above request for transfer of injection a    | authorization, surface pit permit # has been                               |
| 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.:  Date:   | noted, approved and duly recorded in the records of the Kansas Corporation ( | Commission. This acknowledgment of transfer pertains to Kansas Corporation |
| 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 a  | above injection well(s) or pit permit.                                     |
| Permit No.:         . Recommended action:         permitted by No.:         .           Date:  | is acknowledged as   | is acknowledged as   |
| Permit No.:  | the new operator and may continue to inject fluids as authorized by          | the new operator of the above named lease containing the surface pit       |
| Authorized Signature  DISTRICT EPR // 2/7/4 PRODUCTION NOV 2 5 2014 UIE OV 2 5 7014  | Permit No.: Recommended action:  | permitted by No.:  |
| Authorized Signature  DISTRICT EPR // 2/7/4 PRODUCTION NOV 2 5 2014 UIE OV 2 5 7014  |  |  |
| DISTRICT EPR   |  |  |
| DIGITION TODOUTION   |  | NOV 2.5 2014 NOV 9.5 2014  |
|  |  | TODOCTION  |

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#### Side Two

#### Must Be Filed For All Wells

| Well No.   | * Lease Name:                          | INGRAM   |                           | Location: 3 | 5 31 34WSW                         |  |                                     |                  |  |
|--|--|--|---------------------------|-------------|------------------------------------|--|-------------------------------------|------------------|--|
| (YR DRLD/PRE'S7) (i.e. FSL = Feet from South Line) (Oli/Gae/INJW/SW) (PROD/TA/D/Abanc A1-2 INF 15175214990000 / 1800FSL* 1670FEL / HI ACTIVE   |  |  |                           |             |                                    |  |                                     |                  |  |
| A1-2 INF 15175214990000 / 1800FSL* 1670FEL   | Well No.                               |  | Footage from Section Line |             | Type of Well<br>(Oil/Gas/IN.I/WSW) |  | Well Status<br>(PROD/TA'D/Abandoned |                  |  |
| FSUFNL   |  | en en la fille de la companya de la<br>La companya de la co |                           |             |                                    |  |                                     |                  |  |
| FSUFNL   FEUFWL  | A12 INF                                | 15175214990000 /   | 1800FSL*                  | 1670FEL     | НІ                                 |  | ACTIVE                              |                  |  |
| FSUFNL   FEUFWL  |  |  |                           |             |                                    |  |                                     |                  |  |
| FSUFNL   FEUFWL  |  |  |                           |             |                                    |  |                                     |                  |  |
| FSUFNL FELFWL   |  |  | FSL/FNL                   | FEL/FWL     |                                    | · .                                    |                                     |                  |  |
| FSUFNL FELFWL   |  |  | EQI/ENI                   | EEI /EWI    |                                    |  |                                     |                  |  |
| FSL/FNL   FEL/FWL  |  |  | FSDFINE                   |             |                                    | <del></del>                            |                                     |                  |  |
| FSUFNL   FEUFWL  |  |  | FSL/FNL                   | FEL/FWL     | P <u>Marine</u>                    |  |                                     |                  |  |
| FSUFNL   FELFWL  |  |  | FSL/FNL                   | FEL/FWL     |                                    |  |                                     |                  |  |
| FSUFNL   FELFWL  |  |  | FOLITA                    | EEL 8DAA    |                                    |  |                                     |                  |  |
| FSL/FNL   FEL/FWL  |  |  |                           |             |                                    |  |                                     |                  |  |
| FSL/FNL   FEL/FWL  |  |  | FSL/FNL                   | FEL/FWL     |                                    |  |                                     |                  |  |
| FSL/FNL   FEL/FWL  |  |  | FSL/FNL                   | FEL/FWL     |                                    |  |                                     |                  |  |
| FSL/FNL   FEL/FWL  |  |  | ECL/ENG                   | EEL EAR     |                                    |  |                                     |                  |  |
| FSL/FNL   FEL/FWL  | ************************************** |  | FSUTIVE                   | FEDFVVL     |                                    |  |                                     |                  |  |
| FSL/FNL   FEL/FWL  |  |  | FSL/FNL                   | FEL/FWL     |                                    |  | 7 <u>11</u>                         |                  |  |
| FSL/FNL   FEL/FWL  | · · · · · · · · · · · · · · · · · · ·  |  | FSL/FNL                   | FEL/FWL     |                                    |  |                                     |                  |  |
| FSL/FNL   FEL/FWL  |  |  | COL CAR                   | ******      |                                    |  |                                     |                  |  |
| FSL/FNL   FEL/FWL  |  |  | FSL/FNL                   | FEL/FWL     |                                    |  |                                     |                  |  |
| FSL/FNL   FEL/FWL   FSL/FNL   FSL/FNL   FSL/FNL   FSL/FNL   FSL/FNL   FSL/FWL   FSL/FNL   FSL/FWL   FSL/FNL   FSL/FWL   FSL/FNL   FSL/FWL   FSL/   | <u> </u>                               |  | FSL/FNL                   | FEL/FWL     |                                    |  |                                     |                  |  |
| FSL/FNL   FEL/FWL  |  |  | FSL/FNL                   | FEL/FWL     |                                    |  |                                     | tilege<br>Tilege |  |
| 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   |  |  | 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   |  |  | FSI /FNI                  | FEI /FWI    |                                    |  |                                     |                  |  |
| 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     | . <u> </u>                         |  |                                     |                  |  |
| FSL/FNL FEL/FWL FSL/FNL FEL/FWL  | . <u></u>                              |  | FSL/FNL                   | FEL/FWL     |                                    |  |                                     |                  |  |
| Driver of the second of the se |  |  | EQI /ENI                  | CCI /CAA    |                                    |  |                                     |                  |  |
|  |  |  | FOUTNL                    | LETLAAF     |                                    |  |                                     | e e              |  |
| TO A STATE OF THE PROPERTY OF  |  |  | FSL/FNL                   | FEL/FWL     | <u> </u>                           |  | -                                   |                  |  |
|  |  |  | FSL/FNL                   | FEL/FWL     |                                    |  |                                     |                  |  |
| 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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### 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   | County:Seward   |
| Address 2:   | Lease Name: INGRAM Well #:A12 INF   |
| City: OKLAHOMA CITY State: OK Zip: 73102 +   | If filing a Form T-1 for multiple wells on a lease, enter the legal description of  |
| Contact Person: BRENDA WALLER  | the lease below: T031S - R034W: SEC 035 SE4, N2, 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 |
| Address 2:   |   |
| City: State: Zip:+   | _   |
|  | ank batteries, pipelines, and electrical lines. The locations shown on the plat<br>d 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 forr 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 | I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this                      |
| task, I acknowledge that I am being charged a \$30.00 handli<br>If choosing the second option, submit payment of the \$30.00 handlif<br>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 received 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: Signature of Operator or Agent: Tim Well   | Title: Vice President-Land  |
| API # :15175214990000 KDOR #220710   |   |

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

### **Surface Owners**

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| API#: | 151752  | 214990000     | Lease Name: INGRAM        |            | Well # A12 INF |
|-------|---------|---------------|---------------------------|------------|----------------|
|       |         |               |                           |            |                |
| Owne  | r Name: | CONOVER, JACK | C TR; CONOVER, NORMA N TR |            |                |
| A     | ddress: | PO BOX 607    |                           |            |                |
|       | City:   | SATANTA       | State: KS                 | Zip: 67870 |                |
| Owne  | r Name: |               |                           |            |                |
| A     | ddress: |               |                           |            |                |
|       | City:   |               | State:                    | Zip:       |                |
| Owne  | r Name: |               |                           |            |                |
| Ad    | ddress: |               |                           |            |                |
|       | City:   |               | State:                    | Zip:       |                |
| Owne  | r Name: |               |                           |            |                |
| Ad    | ddress: |               |                           |            |                |
|       | City:   |               | State:                    | Zip:       |                |
| Owne  | r Name: |               |                           |            |                |
| Ad    | ddress: |               |                           |            |                |
|       | City:   |               | State:                    | Zip:       |                |
| Owne  | r Name: |               |                           |            |                |
| Ad    | ddress: |               |                           |            |                |
|       | City:   |               | State:                    | Zip:       |                |