081514_JA_Knepper_Heirs_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

Check Applicable Boxes: MUST be submit	tted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 8/15/2014			
X Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 208285			
Gas Gathering System:	Lease Name: JA KNEPPER HEIRS			
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.:	T032S - R038W: SEC 031 SW4, E2 NW4 (NWNW) (SWNW) SEC			
Entire Project: Yes No	4. 032 SW4 SEC 033 SW4 112 4. 11 11 11 11 11 11 11 11 11 11 11 11 11			
Number of Injection Wells**	County: Stevens			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE				
** Side Two Must Be Completed.	Production Zone(s): COUNCIL GROVE			
Side I Wo Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.:	feet from N / S Line of Section			
(API No. If Drill Pit, WO or Haul)				
Tomosf Dit.	feet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling			
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: 08/19/2014 Tim Welch			
Title: Vice President-Land	Signature:			
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			
<u> </u>				
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Fitzwator			
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been			
noted, approved and duly recorded in the records of the Kansas Corporation C	Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the a	bove 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.:	permitted by No.:			
Date:	Date:			
Authorized Signature	Authorized Signature			
DISTRICT EPR 12-4-14 P	PRODUCTION DEC 0 5 2014 UIDEC 0 5 7014			
Mail to: Past Operator New Operator				

Side Two

Must Be Filed For All Wells

* Lease Name	JA KNEPPE	ER HEIRS		* Location: 33	32 38WSW	
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)	
	15189201650000		1320FSL ′	3960FEL	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		
			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		
<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.

API#:15189201650000

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 (C	rathodic Protection Borehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #32864	Well Location:			
Name: XTO ENERGY INC.				
Address 1: 210 PARK AVENUE, SUITE 2350	County:Stevens			
Address 2:	Lease Name: JA KNEPPER HEIRS Well #:1			
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:			
Phone: (405 319-3259 Fax: ()	T032S - R038W: SEC 031 SW4, E2 NW4 (NWNW) (SWNW) SEC 032 SW4 SEC 033 SW4			
Email Address: BRENDA_WALLER@XTOENERGY.COM	3EC 032 3W4 SEC 033 3W4			
Surface Owner Information: Name: See Attached Address 1:	When filing a Form T-1 involving multiple surface owners, attach an additional 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.			
	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. It (House Bill 2032), I have provided the following to the surface cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this			
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling f	knowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this ee, 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 CP-1	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.			
I hereby certify that the statements made herein are true and correct to t	he best of my knowledge and belief.			
Date:Signature of Operator or Agent:	Title: Vice President-Land			
Organica of Operation of Agents	I IIIC.			

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

KDOR #208285

Surface Owners

API#: <u>15189</u> 2	<u>201650000</u>	Lease Name: JA KNEPPER	HEIRS	Well # <u>1</u>	
Owner Name:	ROE, JOYCE				
Address:	3460 E FARRELY RD				
City:	GYPSUM	State: KS	Zip: 67448		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:		_			
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
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Owner Name:					
Address:					
City:		State:	7in:		