**RECEIVED AUG 20 2014 KCC WICHITA** 

#### 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,

Check Applicable Boxes: MUST be submitt	
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.: 207323
Gas Gathering System:	Lease Name: J B DUGGINS
Saltwater Disposal Well - Permit No.:	W2 Sec. 5 Twp. 27 R. 33W [ E X W
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T027S - R033W: SEC 005 All
Entire Project: Yes No	
Number of Injection Wells***	County: Haskell
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE
** Side Two Must Be Completed.	Injection Zone(s):
Confines Pil Domit Ma	feet from N / S Line of Section
Surface Pit Permit No.:(API No. If Drill Pit, WO or Haul)	
Dum D Sattling	
Type of Pit: Emergency Burn Settling	Haul-Off
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
Vice President Land	Tim, Welch
Title: Vice resident-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: WGP-KHC LLC
	Date: 08/15/2014
Title:REGULATORY COMPLIANCE SUPERVISOR	Signature: <i>Nancy Trigwater</i>
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature.
Acknowledgment of Transfer: The above request for transfer of injection a	authorization surface nit permit # has been
	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	
Continuous Toronta only and wood for the control of	
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
	[1] - 그렇게 [2] 이번 이번 시작은 [2] 이번 역사를 받는다.
Permit No.: Recommended action:	permitted by No.:
	Date:
Date:	Authorized Signature
DISTRICT EPR //-2/-/4	PRODUCTION
Mail to: Past Operator New Operato	or District

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#### Side Two

#### Must Be Filed For All Wells

KDOR Leas	I B DUCCINS						
* Lease Name	: J B DUGGINS	* Location: 5 27 33WW2					
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)		
2	15081203120000	2610FSL <sup>/</sup>	4030FEL *	GAS	ACTIVE		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
4 1 11.		FSL/FNL	FEL/FWL				
ing the second second		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 FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
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		FSL/FNL	FEL/FWL				
<u>r</u>		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
. :		FSL/FNL	FEL/FWL	÷			
		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 (C	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #	Well Location:			
Address 1: 210 PARK AVENUE, SUITE 2350	County: Haskell			
Address 2:	Lease Name: J B DUGGINS Well #:2			
City: OKLAHOMA CITY State: OK Zip: 73102 +  Contact Person: BRENDA WALLER	If filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below:			
Phone: ( 405 319-3259 Fax: ( )	T027S - R033W: SEC 005 All			
Email Address: BRENDA_WALLER@XTOENERGY.COM				
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.			
City: State: Zip:+	<del>-</del>			
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered or Select one of the following:  X I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be located CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I address.	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  Cknowledge that, because I have not provided this information, the mer(s). To mitigate the additional cost of the KCC performing this			
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	fee with this form. If the fee is not received with this form, the KSONA-1 I will be returned.			
I hereby certify that the statements made herein are true and correct to	-			
Date: Signature of Operator or Agent: Tim Wolch	Title:Vice President-Land			

KDOR #207323

API#:15081203120000

## **Surface Owners**

## A

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API#: 15081203120000		Lease Name: <u>J B DUGGINS</u>				Well # <u>2</u>		
Owner N	lame:	ALEXANDER, ELDO	ON A					
Add	ress:	13990 S SANDHILL	ROAD					
	City:	GARDEN CITY	St	ate:	KS	Zip:	67846	
O N	I	ALEVANDED TEDD						
		ALEXANDER, TERR						
		13990 S SANDHILL						
	City:	GARDEN CITY	St	ate:	KS	Zip:	67846	
Owner N	lame:							
Add	ress:							
	City:		St	ate:		Zip:		
Owner N	lame:							
Add	ress:							
	City:		St	ate:		Zip:		
Owner N	lame:							
Add	ress:							
	City:		St	ate:		Zip:		
Owner N	lame:							
Add	ress:							
	City:		St	tate:		Zip:		