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081514_Juanita_F_Phillips_7.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,

The state of the s	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.: 222079
Gas Gathering System:	Lease Name:JUANITA F PHILLIPS
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from DE / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T031S - R035W: SEC 017 All
Entire Project: Yes No	
Number of Injection Wells **	County: Stevens
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	
(API No. If Drill Pit, WO or Haul)	feet fromN / S Line of Section
	feet from LE / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off ☐ Workover ☐ Drilling 比Ң
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
Title: Vice President-Land	Offin OWAL
Title,	Signature:
New Operator's License No33999 /	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
	040 000
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titzwater
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 al	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.: Recommended action:	permitted by No.:
Date:	Date:
Authorized Signature	Authorized Signature
네트를 보고 있는 것 같은 사람들은 사람들이 되었다. 그 사람들은 사람들은 사람들이 가지 않는 것이다.	RODUCTIONDEC 0 5 2014UODEC 0 5 2014
Mail to: Past Operator New Operator	District

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Side Two

Must Be Filed For All Wells

* Lease Name:	JUANITA F PHILLIPS		* Location: 17	7 31 35WSW	
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
7	15189221790001	465FSL*	137FWL	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		
7.2 (2.7) 77 (7.4) 10 (7.4)		FSL/FNL	——FEL/FWL		
		FSL/FNL	FEL/FWL		
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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		
		FSL/FNL	FELFWL	<u>jilang sa sa sa saki sa</u> Hiiling sa saki iliku sa sa	
<u>.</u>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		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.

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API#:15189221790001

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) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License #32864	Well Location:		
Name: XTO ENERGY INC.	SW Sec. 17 Twp.31 S. R. 35 East West		
Address 1: 210 PARK AVENUE, SUITE 2350	County: Stevens		
Address 2:	Lease Name: JUANITA F PHILLIPS Well #:7		
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal descripti		
Contact Person: BRENDA WALLER	the lease below: T031S - R035W: SEC 017 All		
Phone: (405 319-3259 Fax: ()	10313 - R035W. SEC 017 All		
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:	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, tan are preliminary non-binding estimates. The locations may be entered of Select one of the following:	odic Protection Borehole Intent), you must supply the surface owners and alk 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. Act (House Bill 2032), I have provided the following to the surface		
owner(s) of the land upon which the subject well is or will be	located: 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		
	acknowledge that, because I have not provided this information, the wner(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 CP	g fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.		
I hereby certify that the statements made herein are true and correct to			
Date: Signature of Operator or Agent: Tim Wold	Title: Vice President-Land		

KDOR #222079

Surface Owners

API#: <u>151892</u>	221790001 Lease Na	ame: JUANITA F PHIL	LIPS	Well # <u>7</u>				
Owner Name: MOTHES, JAMES & SHIRLEY LIV TRS ETAL								
Address:	PO BOX 156							
City:	MOSCOW	State: KS	Zip: 67952-0156					
Owner Name:	CULLISON, J I LIV TR ETAL							
Address:	C/O CULLISON, JW	PO BOX 367						
City:	SATANTA	State: KS	Zip: 67870					
Owner Name:	NORTON, OMAR L & BETTY L							
Address:	2304 ROAD AA							
City:	MOSCOW	State: KS	Zip: 67952-5212					
Owner Name:								
Address:								
City:		State:	Zip:					
Owner Name:								
Address:								
City:		State:	Zip:					
Owner Name:								
Address:								
City:		State:	Zip:					