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:	tea with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:		
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 215926		
Gas Gathering System:	Lease Name:LUCAS		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	Comment luminos		
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T028S - R034W: SEC 021 SW4, NW4, E2		
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):		
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Sectionfeet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling 人み		
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	Signature: Tim Welch		
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		
	00/48/0044		
	Date: 08/15/2014		
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Tuzwater		
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 (Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the a	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		
Permit No.: Recommended action:	permitted by No.:		
Date:	Date:		
	PRODUCTION NOV 2 1 2014 UINOV 2 1 7014		
Mail to: Past Operator New Operator			
· · · · · · · · · · · · · · · · · · ·			

Side Two

Must Be Filed For All Wells

· Lagge Mere	LUCAS		Location, 21 28 34WSW		
* Lease Name	<u> </u>		Location: 2		
Well No.	API No. (YR DRLD/PRE '67)			Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
23	15081204170000 /	660FSL	4770FEL	GAS	ACTIVE
4444		2010/2010/2010	***************************************	4-4/	
	· ·	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	ARANNA	
		FSL/FNL	FEUFWL		
·····	-	FSL/FNL	FEL/FWL		
7844		FSL/FNL	FEL/FWL		
	-	FSUFNL	FEUFWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		_
		FSL/FNL	FEL/FWL		
4114		FSL/FNL	FEL/FWL		
, , , , , , , , , , , , , , , , , , ,		FSUFNL	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		
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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,

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.	nthodic Protection Borehole Intent) X T-1 (Transfer)	CP-1 (Plugging Application)		
OPERATOR: License # 32864 Name: XTO ENERGY INC.	Well Location:	R. 34 Eas K West		
Address 1: 210 PARK AVENUE, SUITE 2350	County:Haskell			
Address 2:	111040	Well #:23		
City: OKLAHOMA CITY State: OK Zip: 73102 + Contact Person: BRENDA WALLER	It filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below: T028S - R034W: SEC 021 SW4, NW4, E2			
Phone: (405 319-3259 Fax: ()				
Email Address: BRENDA_WALLER@XTOENERGY.COM				
Surface Owner Information: Name: See Attached Address 1:	When filing a Form T-1 involving multiple surface sheet listing all of the information to the left for a owner information can be found in the records o county, and in the real estate property tax record	each surface owner. Surface the register of deeds for the		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following: X Lertify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loce.	batteries, pipelines, and electrical lines. The lo the Form C-1 plat, Form CB-1 plat, or a separa t (House Bill 2032), I have provided the follo	cations shown on the plat ate plat may be submitted. wing to the surface		
conner(s) of the land upon which the subject well is of will be lot 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, an	eing filed is a Form C-1 or Form CB-1, the pla	t(s) required by this		
Thave not provided this information to the surface owner(s). Lac KCC will be required to send this information to the surface own task, Lacknowledge that Lam being charged a \$30.00 handling to	per(s). To mitigate the additional cost of the K	CC 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		th this form, the KSONA-1		
Thereby certify that the statements made herein are true and correct to	he best of my knowledge and belief.			
Date: Signature of Operator or Agent: Tim Welch	Title:Title:	ident-Land		

KDOR #215926

API #:15081204170000

Surface Owners

API#: 150812	204170000	Lease Name: LUCAS		Well # <u>23</u>
Owner Name:	SPRUNGER, LOGAN	I ETAL		
Address:	443 RD 100			
City:	SATANTA	State: KS	Zip: 67870	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:		_		
City:		State:	Zip:	
Own on Name			,	
Owner Name: Address:				
City:		State:	Zip:	
City.		State.	Σ ιμ.	
Owner Name:				
Address:				
City:		State:	Zip:	