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.

Mail to: Past Operator New Operator	
	PRODUCTION DEC 0 5 2014 UICDEC 0 5 2014
Date:	Date:
Permit No.: Recommended action:	permitted by 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
is acknowledged as	is acknowledged as
noted, approved and duly recorded in the records of the Kansas Corporation (Commission records only and does not convey any ownership interest in the a	Commission. This acknowledgment of transfer pertains to Kansas Corporation above injection well(s) or pit permit.
Acknowledgment of Transfer: The above request for transfer of injection a	
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Fitzwater
,	Date: 08/15/2014
New Operator's Name & Address: LINN OPERATING, INC. 600 Travis Street, Suite 5100 Houston, TX 77002	Phone:
New Operator's License No. 33999	Contact Person: NANCY FITZWATER Phone: 281-840-4000
Title: Vice President-Land	Signature: <i>Tim Welch</i>
210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102	Date: 08/15/2014
Past Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259
Past Operator's License No. 32864	Contact Person: BRENDA WALLER
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KA
Surface Pit Permit No.:(API No. it Drill Pit, WO or Haul)	feet from N / S Line of Sectionfeet from E / W Line of Section
** Side Two Must Be Completed.	Injection Zone(s):
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
Number of Injection Wells ***	County: Stevens
Entire Project: Yes No	
feet from E / W Line Enhanced Recovery Project Permit No.:	T031S - R036W: SEC 019 E2, NW4, SW4
Spot Location: feet from N / S Line	Legal Description of Lease:
Saltwater Disposal Well - Permit No.:	
Gas Gathering System:	Lease Name: ML REYLDS
X Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 220741
Oil Lease: No. of Oil Wells	Effective Date of Transfer: 8/15/2014

Side Two

Must Be Filed For All Wells

*Lease Name:	M L REYLDS	. Location: 19 31 36WNE			
Well No.	API No. (YR DRLD/PRE 167)		Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/Ta'D/Abandoned)
3	15189214120002	4034FSL	2000FEL	GAS	ACTIVE
	-		***************************************		
		FSL/FNL	FEL/FWL	***************************************	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEUFWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	www.	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		***************************************
······		FSL/FNL	FEL/FWL		
	***************************************	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	N-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
TANK WALLE TO THE TOTAL THE TANK THE THE TANK TH		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.

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 # 32864 Name: XTO ENERGY INC.	Well Location:NE		
Address 1: 210 PARK AVENUE, SUITE 2350	County:Stevens		
Address 2:	Lease Name: M L REYLDS Well #:3		
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: T031S - R036W: SEC 019 E2, NW4, SW4		
Contact Person: BRENDA WALLER			
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:	county, and in the real estate property tax records of the county treasurer.		
City:+			
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered of Select one of the following:	dic Protection Borehole Intent), you must supply the surface owners and a batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
X I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be keeper 1 that I am filing in connection with this form; 2) if the form I form; and 3) my operator name, address, phone number, fax, a	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		
I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface owners, I acknowledge that I am being charged a \$30.00 handling	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this lifee, 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-	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	the best of my knowledge and belief.		
Date: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land		

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

KDOR #220741

API#:15189214120002

Surface Owners

API#: 151892	214120002	Lease Name: MIL REYLUS		Well# <u>3</u>	
Owner Name:	REYNOLDS, KAREN	L & LARRY TRS TTEES			
Address:	1401 S JEFFERSON				
City:	HUGOTON	State: KS	Zip: 67951-3016		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
0					
Owner Name:					
Address:		54-4-	7 1		
City:		State:	Zip:		