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.

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:  KS Dept of Revenue Lease No.:  221985		
Gas Lease: No. of Gas Wells "			
Gas Gathering System:	Lease Name: MANN		
Saltwater Disposal Well - Permit No.:	1		
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T033S - R035W: SEC 006 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.			
Side Two wilst be completed.	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling			
Type of Mit.   Cities Gency   Down   Commiss			
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 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		
,	00/47/004 4		
	Date: 08/15/2014		
Title: _REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Tugoator		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #has been		
	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the			
	1		
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 DEC 0 2 2014 UDEC 0 2 2014		
Mail to: Past Operator New Operat			

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#### Side Two

#### Must Be Filed For All Wells

Lease Name	MANN	• Location: 6 33 35WSW			
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)
24 INF	15189222060001	1250FSL	1250FWL	н	ACTIVE
		FSL/FNL	FEL/FWL		
A4-11-11-11-11-11-11-11-11-11-11-11-11-11		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		ALI
		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		

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 (	Cathodic Protection Borehole Intent) X T-1 (Trans	sfer) CP-1 (Plugging Application)		
OPERATOR: License # 32864	Well Location:			
Name: XTO ENERGY INC.				
Address 1: 210 PARK AVENUE, SUITE 2350	County:Stevens			
Address 2:	,	Well #: <b>24 INF</b>		
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal descri			
Contact Person: BRENDA WALLER	the lease below:			
Phone: ( 405 319-3259 Fax: ( )	T033S - R035W: SEC 006 All			
Email Address: BRENDA_WALLER@XTOENERGY.COM				
Surface Owner Information: Name: See Attached	When filing a Form T-1 involving multiple	curtos supers attack as additional		
Address 1:	sheet listing all of the information to the	left for each surface owner. Surface		
Address 2:	owner information can be found in the re county, and in the real estate property ta			
City: State: Zip: +				
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:  X   certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be keepen that I am filling in connection with this form; 2) if the form if form; and 3) my operator name, address, phone number, fax, a lacknowledge this information to the surface owner(s). I a KCC will be required to send this information to the surface owner(s). I acknowledge that I am being charged a \$30.00 handling	of the Form C-1 plat, Form CB-1 plat, or a ct. (House Bill 2032), I have provided the cated: 1) a copy of the Form C-1, Form being filed is a Form C-1 or Form CB-1, and email address.  Cknowledge that, because I have not proviner(s). To mitigate the additional cost of fee, payable to the KCC, which is enclose.	ne following to the surface in CB-1, Form T-1, or Form the plat(s) required by this evided this information, the of the KCC performing this sed 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 hereby certify that the statements made herein are true and correct to	1 will be returned.	ved with this form, the KSONA-1		
2000 ALC		e President-Land		
Date: Signature of Operator or Agent: Signature Of Operator or Agent:	Tal. Vic	e President-Land		

KDOR #221985

API#:15189222060001

### **Surface Owners**

API#: 151892	222060001	Lease Name: MANN		Well # 24 INF
Owner Name:	MANN, HOWARD H	& FE MANN LIV TR TTEE		
Address:	1867 S GLENDALE S	ST		
City:	WICHITA	State: KS	Zip: 67218-4323	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:		_		
City:		State:	Zip:	
Owner Name:				
Address:		Chaha	<b>7</b> :	
City:		State:	Zip:	