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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 submitted	ted 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.: 208465			
Gas Gathering System:	Lease Name: MANN			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T033S - R035W: SEC 007 All			
Entire Project: Yes No				
Number of Injection Wells **	County: Stevens			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE Injection Zone(s):			
** Side Two Must Be Completed.				
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	feet from N/ S Line of Section			
, and a sum of the sum	teet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling Ku			
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			
	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			
	Date: 08/15/2014			
Title:REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Tizzvator			
THE TREATMENT COMM ENTINE SOI ENVISOR	Signature.			
Acknowledgment of Transfer: The above request for transfer of injection a	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	above injection well(s) or pit permit.			
	<u> </u>			
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 A 0018			
DISTRICT EPR /2 -/-/4 Mail to: Past Operator New Operator	PRODUCTION DEC 0 2 2014 UIC DEC 17			
Mail to: Past Operator New Operator	or District			

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Side Two

Must Be Filed For All Wells

Lease Name	: MANN		* Location: 7 33 35WNW			
Well No. API No. (YR DRLD/PRE '67)			Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned	
34	15189207380000	3960FSL	3960FEL	GAS	ACTIVE	
		and the second s	*************			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
1444		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		FSL/FNL	FEL/FWL			
			FEL/FWL			
-		FSL/FNL	FEL/FWL			
1 1000		FSUFNL	FEL/FWL			
		FSL/FNL	FEL/FWL		ALLEN AND AND AND AND AND AND AND AND AND AN	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		41-41-4-4	
		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#:15189207380000

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	Cethodic Protection Borehole Intent) X T-1 (Tia	nsfer) CP-1 (Plugging Application)			
OPERATOR: License # 32864	Well Location:				
Name: XTO ENERGY INC.		33 S. R. 35 Eas West			
Address 1: 210 PARK AVENUE, SUITE 2350	County:Stevens				
Address 2:	Lease Name: MANN	Well #: 34			
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on	a lease, enter the legal description of			
Contact Person: BRENDA WALLER	the lease below: T033S - R035W: SEC 007 All				
Phone: (405 319-3259 Fax: ()					
Email Address: BRENDA_WALLER@XTOENERGY.COM					
Surface Owner Information: Name: See Attached	When filing a Form T-1 involving multip	la curtaca aumore, attach an additional			
Address 1:	sheet listing all of the information to th	e lett for each surface owner. Surface			
Address 2:	owner information can be found in the county, and in the real estate property t				
State: Zip: +					
the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered of Select one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	on the Form C-1 plat, Form CB-1 plat, or Act (House Bill 2032), I have provided located: 1) a copy of the Form C-1, For	a separate plat may be submitted. the following to the surface m CB-1, Form T-1, or Form			
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,	being filed is a Form C-1 or Form CB-1 and email address.	, the plat(s) required by this			
I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface o task, I acknowledge that I am being charged a \$30.00 handling.	wner(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 CF	g fee with this form. If the fee is not rec -1 will be returned.	eived with this form, the KSONA-1			
I hereby certify that the statements made herein are true and correct t					
Date: Signature of Operator or Agent: Weld	h Title:	ice President-Land			
agrand of operator acceptant					

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

KDOR #208465

Surface Owners

API#: 151892	207380000	Lease Name: MANN		weii# <u>34</u>	
Owner Name:	WALKEMEYER PRO	PERTIES LP, R & L			
Address:	1607 S EISENHOWE	R			
City:	HUGOTON	State: KS	Zip: 67951-3067		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
_					
Owner Name:					
Address:		5	72		
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
Citv:		State:	Zip:		