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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:	EU WILLI DIIS IOTTI.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:		
X Gas Lease: No. of Gas Wells			
Gas Gathering System:	Lease Name: MCCOY		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: T028S - R034W: SEC 013 SE4, NE4, W2		
Enhanced Recovery Project Permit No.:	10265 - R034W. SEC 013 SE4, NE4, W2		
Entire Project: Yes No			
Number of Injection Wells **	County: Haskell Production Zone(s): CHASE		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE			
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling		
Type of Fit			
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		
Title:	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		
but travis street, suite stockhouston, 17, 17002	00145/2044		
	Date: 08/15/2014		
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Pitzwater		
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			
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		
	permitted by No.:		
Permit No.: Recommended action:	porimited by 100		
0	Date:		
Date:	Authorized Signature		
DISTRICT EPR	PRODUCTION NOV 2 5 2014 UINOV 2 5 2014		
	or District		

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Side Two

Must Be Filed For All Wells

KDOR Lease No.: MCCOY		* Location: 13 28 34WSW			
Lease Name	9;		Location:		
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr	Section Line om South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
12	15081202830002	692FSL	33 3FEL 1980FWL	GAS	ACTIVE
			FEL/FWL		
		FSL/FNL	FEL/FWL		
ALMINITE		FSL/FNL	FEL/FWL	and the state of t	
		FSL/FNL	FEL/FWL		
	ANA	FSL/FNL	FEL/FWL		
		FSUFNL	FEL/FWL		
		FSL/FNL	FEL/FWL	. 12 - 42	
		FSL/FNL	FEL/FWL		
	A. M.	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		
	SALA .	FSL/FNL	FEL/FWL		
		FSL/FNL	FEUFWL		
		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#:15081202830002

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	thodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 32864 Name: XTO ENERGY INC. Address 1: 210 PARK AVENUE, SUITE 2350	Well Location: SW Sec. 13 Twp.28 S. R. 34 East West County:Haskell		
71000 2000 11	Lease Name: MCCOY Well #:12		
Address 2: 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 of the lease below: T028S - R034W: SEC 013 SE4, NE4, W2		
Phone: (405 319-3259 Fax: ()	10203 - 7034W. SEC 013 SE4, NE4, W2		
Email Address: BRENDA_WALLER@XTOENERGY.COM			
Surface Owner Information: Name: See Attached Address 1:	When filing a Form T-1 involving multiple surface owners, attach an additional 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 county, and in the real estate property tax records of the county treasurer.		
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 or Select one of the following: X	batteries, pipelines, and electrical lines. The locations snown on the pla the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted		
CP-1 that I am filing in connection with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, at	eing 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). Lac KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling	knowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this 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-	ee with this form. If the fee is not received with this form, the KSONA-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		
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

KDOR #220343

Surface Owners

API#: 150812	202830002	Lease Name: MCCOY		Well # <u>12</u>	
Owner Name:	KING, BILL A & DEW	/EES KING, JEFFREY A LE			
Address:	1102 MOCKINGBIRD	LANE			
City:	GARDEN CITY	State: KS	Zip: 67846		
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:					
City:		State:	Zip:		