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:	1		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 8/15/2014		
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 202780		
Gas Gathering System:	Lease Name: MORRELL		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: T032S - R036W: SEC 014 N2, S2		
Enhanced Recovery Project Permit No.:	10325 - RUSDAY: SEC 014 NZ, 32		
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.	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pil, WO or Haul)	feet from		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling 火ル		
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	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 Fitzwater		
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			
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 pi		
Permit No.: Recommended action:	permitted by No.:		
Date:	Date:		
Authorized Signature	Authorized Signature 0.0.1		
DISTRICT EPR 12-3-14	PRODUCTION DEC 0 4 2014 DIC 0 4 2014		
	or District		

Side Two

Must Be Filed For All Wells

Lease Name:	MORRELL	* Location: 14 32 36WSW			
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
1	15189001270000V	2470 2310 FSL	2840 2970 FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
A					
		FT-014 STT 14			
			FEL/FWL		
			FEL/FWL		
- запарат					
	4	FSL/FN			
		FSL/FN	LFEUFWL		
		FSL/FN	LFEL/FWL		
,,,,		FSL/FN	LFEL/FWL		
		FSL/FN	LFEL/FWL		
		FSL/FN	LFEL/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.

API#:15189001270000

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.

OPERATOR: License # 32864	Well Location:				
Name: XTO ENERGY INC.					
Address 1: 210 PARK AVENUE, SUITE 2350	County: Stevens				
Address 2:	MODDELL				
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description				
Contact Person: BRENDA WALLER	the lease below: T032S - R036W: SEC 014 N2, S2				
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 sheet listing all of the information to the left for each surface owner. Surface				
Address 1:	— owner information can be found in the records of the register or deeds for the				
Address 2:	county, and in the real estate property tax records of the county treasurer.				
City: State: Zip:+ If this form is being submitted with a Form C-1 (Intent) or CB-1 (C	athodic Protection Borehole Intent), you must supply the surface owners and				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (C	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (C the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be enter Select one of the following: X Certify that, pursuant to the Kansas Surface Owner Not cowner(s) of the land upon which the subject well is or will	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. ice Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form corm being filed is a Form C-1 or Form CB-1, the plat(s) required by this				
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Surface Owners

API#: 151890	001270000	Lease Name: MORRELL		Well # <u>1</u>
Owner Name:	CHAFFIN INVESTME	ENT INC		
Address:	PO BOX 77			
City:	DODGE CITY	State: KS	Zip: 67801-0077	
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:	