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.

Oil read No 4 Oil Marks	8/15/2014
Oil Lease: No. of Oil Wells** Gas Lease: No. of Gas Wells**	Effective Date of Transfer:
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 202999
Gas Gathering System: Saltwater Disposal Well - Permit No.:	Lease Name: NIX
Spot Location: feet from N / S Line	
Spot Location: feet from N / S Line feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T033S - R035W: SEC 030 AII
Entire Project: Yes No	
Number of Injection Wells **	
*** ***********************************	County: Stevens
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
11 Side Two Must Be Completed.	Injection Zone(s):
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
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling jth
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	00/45/0044
	Date:
Title: Vice President-Land	Signature:
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
	0014510044
	Date: 08/15/2014
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Fligwater
Acknowledament 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 C	
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 pit
Permit No.; Recommended action:	permitted by No.:
Date:	Date:
Authorized Signature	Authorized Signature
	PRODUCTION DEC 0 4 2014 LEC U 4 7014
Mail to: Past Operator New Operator	or District

Side Two

Must Be Filed For All Wells

Lease Name	NIX		* Location:_30	0 33 35WSE	1
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)
2	15189003540000 🗸	2540FSL	2540FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	•	
		FSL/FNL	FEL/FWL	-107811	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	-	FSL/FNL	FEL/FWL	***************************************	
		FSUFNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
			FEL/FWL		
					
			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

^{*}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.

OPERATOR: License # 32864					
	Well Location:				
Name: XTO ENERGY INC.					
Address 1: 210 PARK AVENUE, SUITE 2350	County: Stevens				
Address 2:					
City: OKLAHOMA CITY State: OK Zip:73102 +	The state of the s				
Contact Person: BRENDA WALLER	the lease below: T033S - R035W: SEC 030 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 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:	the contract of the contract o				
City:	-				
the KCC with a plat showing the predicted locations of lease roads, ta	hodic Protection Borehole Intent), you must supply the surface owners and ink batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.				
owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this				
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, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface.	and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this				
 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, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handling. 	and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ng fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.				

Surface Owners

API#: <u>151890</u>	003540000	Lease Name: NIX		Well # 2	
Owner Name:	HATHAWAY, GARY	R & SONJA J ETAL			
Address:	218 N WILSON				
City:	ULYSSES	State: KS	Zip: 67880		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
Owner Name:					
Address:					
City:		State:	Zip:		
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Owner Name:					
Address:					
City:		State:	Zip:		
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Owner Name:					
Address:					
City:		State:	Zip:		
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