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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.

Check Applicable Boxes: MUST be submit	itted with this form.		
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.: N/A		
Gas Gathering System:	Lease Name: PADEN		
X Saltwater Disposal Well - Permit No.: D-28804			
Spot Location: 381FSL feet from N / S Line	SW_Sec. 24 Twp. 33 R. 37W EXW		
4990FEL feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T033S - R037W: SEC 024 N2, SE4, SW4		
Entire Project: Yes No			
Number of Injection Wells**	County: Stevens		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s):		
** Side Two Must Be Completed.	Injection Zone(s): 3984-4080 Shawpee Linustone		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO of Haul)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling			
Past Operator's License No	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. 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:		
	Date: 08/15/2014		
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titzwater		
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	above injection well(s) or pit permit.		
Linn Operating Inc 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. D-28,804 . Recommended action: Nove	permitted by No.:		
	·		
Date: 11-26-14 (heurt Sent)	Date:		
Authorized Signature	Authorized Signature DEC 0 3 7 [1] 4 //- 7/ //-		
1 1 1 1 1	PRODUCTION UIC 11-26-14		
Mail to: Past Operator New Operato	District 1 1 26 14		

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Side Two

Must Be Filed For All Wells

Lease Name: PADEN			* Location: 24 33 37WSW			
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	
424SWD	15189225420001	362 384FSL	4993 4990FEL	SWD	ACTIVE	
		FSL/FNL	FEL/FWL	7010000		
		FSL/FNL				
		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			
	AHLAN	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	PROBLEM	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

^{*} 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 (C	athodic Protection Borehole Intent)			
OPERATOR: License # 32864	Well Location:			
Name: XTO ENERGY INC.	SW Sec. 24 Twp.33 S. R. 37 East West			
Address 1: 210 PARK AVENUE, SUITE 2350	County-Stevens			
Address 2:	Lease Name: PADEN Well #:424SWD			
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal description			
Contact Person: BRENDA WALLER	the lease below: T033S - R037W: SEC 024 N2, SE4, SW4			
Phone: (405 319-3259 Fax: ()	10000 - 100711. 000 024 112, 004, 0114			
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:	county, and in the real estate property tax records of the county treasurer.			
City:				
are preliminary non-binding estimates. The locations may be entered or Select one of the following: X 1 certify that, pursuant to the Kansas Surface Owner Notice A	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. It (House Bill 2032), I have provided the following to the surface			
owner(s) of the land upon which the subject well is or will be in CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, at	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this d email address.			
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, Lacknowledge that Lam 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-1 will be returned.			
I hereby certify that the statements made herein are true and correct to	he best of my knowledge and belief.			
Date: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land			
Jigi Midle of Operator of Agent.	TWO			

KDOR #N/A

API#:15189225420001

Surface Owners

API#: <u>151892</u>	225420001	Lease Name: PADEN		Well # 424SWD
Owner Name:	HEGER, MARLIN P 8	ERMA I TRS		
Address:	1080 ROAD 21			
City:	HUGOTON	State: KS	Zip: 67951-5303	
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:				
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City:		State:	Zip:	