#### RECEIVED AUG 20 2014 KCC WICHITA

## 081514\_Parker\_Est\_1-5INF.pdf

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 submitt	ted 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.: 220482			
Gas Gathering System:	Lease Name: PARKER ESTATE			
Saltwater Disposal Well - Permit No.:	00 04 000			
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T034S - R036W: SEC 019 E2 SW4 (NWSW) (SWSW) SEC 029 SW4 SEC 030 E2			
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 Pit, WO or Haul)	feet from FE / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling L4			
	Δ			
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. 33999	Contact Person: NANCY FITZWATER			
New Operator's Name & Address: LINN OPERATING, INC.	Phone:			
600 Travis Street, Suite 5100 Houston, TX 77002	Oil / Gas Purchaser: ONEOK FIELD SERVICES			
	Date: 08/15/2014			
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Füzoates			
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 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:			
	PRODUCTION NOV 2 6 2014 UIC NUV 2 6 2014			
	District			

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#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	No.: 220482					
*Lease Name:	PARKER ESTATE		' Location: 29 34 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)	
15 INF	15189219160001	1250FSL	1250FWL	Н	ACTIVE	
		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			
va		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
			FEL/FWL			
			FEL/FWL			
			FEVFWL			
***************************************	<u> </u>	FSL/FNL	FEL/FWL			
					Amagana to a supplied to	
	\$ APP. (B.) (B.) (B.) (B.) (B.) (B.)	FSL/FNL	FEL/FWL			
	ARAMANA	FSL/FNL	FEL/FWL		At	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			

A separate sheet may be attached if necessary

<sup>\*</sup> 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#:15189219160001

## 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.	SW Sec. 29 Twp. 34 S. R. 36 East West		
Address 1: 210 PARK AVENUE, SUITE 2350	County:Stevens		
Address 2:	Lease Name: PARKER ESTATE Well #:15 INF		
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: T034S - R036W: SEC 019 E2 SW4 (NWSW) (SWSW) SEC 029 SW4 SEC 030 E2		
Contact Person: BRENDA WALLER			
Phone: ( 405 319-3259 Fax: ( )			
Email Address: BRENDA_WALLER@XTOENERGY.COM	-		
Surface Owner Information:			
Name: See Attached	When filling a Form T-1 involving multiple surface owners, attach an additional		
Address 1:	owner who mador 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: State: Zip:+			
the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered 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 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	hodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the being filed is a Form C-1 or Form CB-1, the plat(s) required by this , and email address.  I acknowledge that, because I have not provided this information, the		
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KDOR #220482

### **Surface Owners**

API#: 151892	219160001	Lease Name:	PARKER ESTATE	<u> </u>	Well # <u>15 INF</u>
Owner Name:	GRAGE, ALLEN PAF	RKER & LIEBK	KEMANN, SAN		
Address:	3408 AMHERST AVE	<u> </u>			
City:	DALLAS	Sta	ate: TX	Zip: 75225-7624	
Owner Name:					
Address:					
City:		Sta	ate:	Zip:	
Owner Name:					
Address:					
City:		Sta	ate:	Zip:	
Owner Name:					
Address:					
City:		Sta	ate:	Zip:	
Owner Name:					
Address:					
City:		Sta	ate:	Zip:	
Owner Name:					
Address:					
City:		Sta	ate:	Zip:	