KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 1-1 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: 8/15/2014 Oil Lease: No. of Oil Wells _ Effective Date of Transfer: Gas Lease: No. of Gas Wells ____ 203163 KS Dept of Revenue Lease No.: Gas Gathering System:__ Lease Name: PARKER ESTATE Saltwater Disposal Well - Permit No.: ___ NE Sec. 32 Twp. 34 A. 36W EXW ___ teet from N / S Line Legal Description of Lease: _____feet from E / W Line T034S - R036W; SEC 031 NE4, E2 NW4 (NWNW) (SWNW) SEC Enhanced Recovery Project Permit No.:_ 032 W2 Entire Project: Yes No Number of Injection Wells _ County: __Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s): ** Side Two Must Be Completed. Injection Zone(s): Surface Pit Permit No.: __ N / S Line of Section feet from (API No. If Drill Pit, WO or Haul) E / W Line of Section feet from Workover Type of Pit: Emergency Burn Settling Haul-Off Drilling Past Operator's License No. 32864 **BRENDA WALLER** Contact Person: _ Past Operator's Name & Address: XTO ENERGY INC. Phone: 405-319-3259 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102 08/15/2014 Tim Welch Vice President-Land Signature: New Operator's License No. 33999 < NANCY FITZWATER Contact Person: . New Operator's Name & Address: LINN OPERATING, INC. 281-840-4000 Phone: 600 Travis Street, Suite 5100 Houston, TX 77002 Oil / Gas Purchaser: ONEOK FIELD SERVICES 08/15/2014 Title: REGULATORY COMPLIANCE SUPERVISOR Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #_ 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 above injection well(s) or pit permit. __ 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 _____ . Recommended action: permitted by No.: _ Date: Date: Authorized Signature DISTRICT ___ PRODUCTION __

New Operator,

Mail to: Past Operator_

Side Two

Must Be Filed For All Wells

* Lease Name:	PARKER ESTATE API No. (YR DRLD/PRE '67)	* Location: 32 34 36WNE			
Well No.		Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
4	15189005740001	246 FNL 4950FNL	1320FEL	GAS	ACTIVE
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		FSL/FNL	FEL/FWL		<u></u>
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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				441	
	-	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.

API#:15189005740001

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.

00004				
OPERATOR: License #	Well Location:			
Name: XTO ENERGY INC.				
Address 1: 210 PARK AVENUE, SUITE 2350	County: Stevens			
Address 2:	Lease Name: PARKER ESTATE Well #:4			
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:			
Contact Person: BRENDA WALLER	T034S - R036W: SEC 031 NE4, E2 NW4 (NWNW) (SWNW)			
Phone: (405 319-3259 Fax: ()	SEC 032 W2			
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:				
City: State: Zip:+	_			
	hodic Protection Borehole Intent), you must supply the surface owners and			
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	ank batteries, pipelines, and electrical lines. The locations shown on the platton the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. 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 being filed is a Form C-1 or Form CB-1, the plat(s) required by this			
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 1 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, 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.	ank batteries, pipelines, and electrical lines. The locations shown on the plat it on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. 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 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 owner(s). To mitigate the additional cost of the KCC performing this ng fee, payable to the KCC, which is enclosed with this form.			
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KDOR #203163

Surface Owners

API#: 15189005740001		Lease Name: PARKER ESTATE		Well # <u>4</u>				
Owner Name:	COX, JERRY H							
Address:	499 ROAD 18							
City:	HUGOTON	State: KS	Zip: 67951-5108					
Owner Name:	COX, TROY M & SHELLEY L							
Address:	503 ROAD 18							
City:	HUGOTON	State: KS	Zip: 67951					
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Owner Name:								
Address:								
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