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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. MUST be submitted with this form.

O'LL No of O'RM's II.	8/15/2014
Oil Lease: No. of Oil Wells	Effective Date of Transfer:
	KS Dept of Revenue Lease No.: 203161
Gas Gathering System:	Lease Name: PARKER ESTATE
Saltwater Disposal Well - Permit No.:	
Spot Location:teet from N / S Line	Legal Description of Lease:
feet from E / W Line Enhanced Recovery Project Permit No.:	T034S - R036W: SEC 031 NE4, E2 NW4 (NWNW) (SWNW) SEC
Entire Project: Yes No	032 W2
Number of Injection Wells **	
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	County: Stevens
	Production Zone(s): CHASE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.: (API No. It Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover Drilling
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
	0014510044
DECL!! A TODY COMPLIANCE SUBEDVISOR	Date: <u>08/15/2014</u> Signature: <i>Nancy Tignator</i>
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature:
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. 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.
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
DISTRICT EPR _//-25-/4 F	PRODUCTION NOV 2 6 2014 UIC NOV 2 6 2014
	or District

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Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 203161 🗸					
* Lease Name:	PARKER ESTATE		· Location: 31 34 36WNE			
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)	
2	15189005720000 🗸	3960FSL	1320FEL ~	GAS	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	AAA006-100-990-9-100998-100-0-19	<u> </u>	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		LI WOMER LIBERTH LIBERT LANGE AND THE WORLD HAVE THE WAY	
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		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			
		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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API#:15189005720000

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 (Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 32864 Name: XTO ENERGY INC.	Well Location:
240 DADY AVENUE CUITE 2250	County:Stevens
	Lease Name: PARKER ESTATE Well #:2
Address 2:	It filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: BRENDA WALLER	the lease below: 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:	county, and in the real estate property tax records of the county treasurer.
City:	
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered of Select one of the following:	dic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
	ocated: 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
	cknowledge that, because I have not provided this information, the vner(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-	fee with this form. If the fee is not received with this form, the KSONA-1 1 will be returned.
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.
Date: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land

KDOR #203161

Surface Owners

API#: 15189	005/20000	Lease Name: PARKER ES	IAIE	Well # <u>2</u>	
Owner Name:	EARTHGREENS FAI	RMS LLC			
Address:	PO BOX 354				
City:	KECHI	State: KS	Zip: 67067-0354		
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:					
Citv:		State:	Zin:		