RECEIVED AUG 20 2014 KCC WICHITA

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: 8/15/2014 Oil Lease: No. of Oil Wells _ Effective Date of Transfer: Gas Lease: No. of Gas Wells ___ KS Dept of Revenue Lease No.: Gas Gathering System:_ Lease Name: PECHIN Saltwater Disposal Well - Permit No.: ___ SE Sec. 14 Twp. 30 R. 33W EXW ______feet from N / S Line Legal Description of Lease: feet from E / W Line T030S - R033W; SEC 014 SW4, SE4, NW4, NE4 Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells _ County: Haskell Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s): ** 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 E / W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover 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 Date: 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: Authorized Signature Authorized Signature DISTRICT ___ Mail to: Past Operator_ New Operator, District

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Side Two

Must Be Filed For All Wells

(YR DRLD/PRE '57) (i.e. FSL = Feet from South Line) (Oli/Gas/RUJWSW) (PROD/TA 1-2 15081210870000 1250FSL 2540FEL GAS ACTIVE FSLFNL FELFWL			PECHIN	* Lease Name: PECHIN			
FSUFNL FEUFWL FSUFNL F	Well Status (PROD/TA'D/Abandoned)						
FSUFNL FELFWL FSUFNL FELFWL FSUFNL FEUFWL FSUFNL FELFWL		ACTIVE	GAS	2540FEL	1250FSL	15081210870000 /	12
FSUFNL FEUFWL				-			
FSUFNL FEUFWL				FEL/FWL	FSUFNL		
FSUFNL				FEL/FWL	FSL/FNL		
FSL/FNL		A		FEL/FWL	FSL/FNL		
FSL/FNL FEL/FWL				FEL/FWL	FSL/FNL	A.A.	
FSL/FNL FEL/FWL FSL/FNL FSL/FNL FEL/FWL FSL/FNL FSL/				FEL/FWL	FSL/FNL		
FSL/FNL FEL/FWL				FEL/FWL	FSL/FNL		
FSUFNL FEUFWL				FEL/FWL	FSL/FNL	WANTED A CARLO MATERIA CONTRACTOR	
FSU/FNL FEU/FWL			Wal-salahan and Annas and Anna	FEL/FWL	FSL/FNL		
FSUFNL FEUFWL				FEL/FWL	FSL/FNL	****	
FSUFNL FEUFWL				FEL/FWL	FSL/FNL	**************************************	
FSL/FNL FEL/FWL		******		FEL/FWL	FSL/FNL	***************************************	
FSL/FNL FEL/FWL				FEL/FWL	FSL/FNL		
				FEL/FWL	FSL/FNL		
FSUFNL FEUFWL				FEL/FWL	FSL/FNL		
FSUFNLFEUFWL				FEL/FWL	FSL/FNL		
				FEL/FWL	FSL/FNL		
				FEL/FWL	FSL/FNL		
FSL/FNLFEL/FWL	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4						
FSL/FNL FEL/FWL							
FSL/FNLFEL/FWL	***************************************						
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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#:15081210870000

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 (Ca	athodic Protection Borehol	e Intent) XT-1 (Transfe	er) CP-1 (Plugging Application)				
OPERATOR: License #32864	Well Location:						
Name:XTO ENERGY INC.		Sec. 14 Twp.30	_S. R. 33 Eas West				
Address 1: 210 PARK AVENUE, SUITE 2350	County:Haskell						
Address 2:	Lease Name: PEG	CHIN	Well #:12				
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of						
Contact Person: BRENDA WALLER	the lease below:						
Phone: (405 319-3259 Fax: ()	T030S - R033W: SEC 014 SW4, SE4, NW4, NE4						
Email Address: BRENDA_WALLER@XTOENERGY.COM							
Surface Owner Information:	y						
Name: See Attached			urface owners, attach an additional				
Address 1:	ess 1;						
Address 2:	county, and in the real estate property tax records of the county treasurer.						
City:++							
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic the KCC with a plat showing the predicted locations of lease roads, tank beare preliminary non-binding estimates. The locations may be entered on the Select one of the following:	oatteries, pipelines, a the Form C-1 plat, Fo	and electrical lines. T orm CB-1 plat, or a s	The locations shown on the plat eparate plat may be submitted.				
I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loc 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, and	ated: 1) a copy of the ing filed is a Form C	ne Form C-1, Form C	CB-1, Form T-1, or Form				
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface ownersk, I acknowledge that I am being charged a \$30.00 handling fe	er(s). To mitigate th	e additional cost of t	he KCC performing this				
If choosing the second option, submit payment of the \$30.00 handling fe form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1		the fee is not receive	ed with this form, the KSONA-1				
I hereby certify that the statements made herein are true and correct to the	ne best of my knowle	edge and belief.					
Date: Signature of Operator or Agent: Tim Welch		Title: Vice	President-Land				

KDOR #N/A

Surface Owners

API#: 150812	210870000	Lease Name: PECHIN		Well # <u>12</u>
Owner Name:	LEONARD FAMILY	FARMS LLC		
Address:	2252 ROAD OO			
City:	SUBLETTE	State: KS	Zip: 67877	
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:				
City:		State:	Zip:	