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.

Oll and About Oll Mall	8/15/2014			
Oil Lease: No. of Oil Wells** Gas Lease: No. of Gas Wells**	Effective Date of fransfer:			
	KS Dept of Revenue Lease No.: 203167 Lease Name: PERSINGER			
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	Legal Description of Lease:			
feet fromE /W Line	T034S - R036W: SEC 016 NW4, NE4, SE4, SW4			
Enhanced Recovery Project Permit No.:				
Entire Project:YesNo				
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.: (API No. if Drill Pft, WO or Haul)	feet from N / S Line of Section			
Tuno at Dits.	teet fromE /W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling Ku			
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:				
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			
	Date: 08/15/2014			
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Fitzwater			
Acknowledgment of Transfer: The above request for transfer of injection	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	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 4 001			
DISTRICT EPR /2-3-/4	PRODUCTION DEC 0 4 2014 UICDEC 0 4 2014			
Mail to: Past Operator New Operator				



Side Two

Must Be Filed For All Wells

* Lease Name:	PERSINGER	* Location: 16 34 36WNW			
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)
1	15189005570000	2970FSL /	2970FEL	GAS	ACTIVE
		FSU/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSUFNL	FEL/FWL		The Control of the Co
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		Manufacture and the second
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL	***************************************	
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
<u></u>		FSL/FNL	FEL/FWL	www.	
		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.

32864	
OPERATOR: License #	Well Location: <mark>NW</mark> Sec. <u>16</u> Twp. 34 S. R. <u>36</u> East West
Name: ATO ENERGY INC. Address 1: 210 PARK AVENUE, SUITE 2350	
Address 2:	DEDCINOED
City: OKLAHOMA CITY State: OK Zip: 73102 +	
Contact Person: BRENDA WALLER	the lease below:
Phone: (405 319-3259 Fax: ()	T034S - R036W: SEC 016 NW4, NE4, SE4, SW4
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:	
	Cathodic Protection Borehole Intent), you must supply the surface owners and
If this form is being submitted with a Form C-1 (Intent) or CB-1 (C the KCC with a plat showing the predicted locations of lease roads	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (C the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be enter Select one of the following: X I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will	Cathodic Protection Borehole Intent), you must supply the surface owners and it, tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The locations shown on the plat red on the Form C-1 plat, and the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
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Surface Owners

API#: 151890	005570000 Le	ease Name: PERSINGEI	₹	Well # <u>1</u>
Owner Name	WHEELER INVESTMEN	ITS LP		
		i sai sa i s		
Address:	2044 ROAD H			
City:	HUGOTON	State: KS	Zip: 67951-5184	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				
City:		State:	Zip:	
-			•	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:			·	
Address:				
City:		State:	Zip:	
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Owner Name:				
Address:				
City:		State:	Zip:	