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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.

Check Applicable Boxes: MUST be submitted	tled 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.: 222034				
Gas Gathering System:	Lease Name: PIPER				
Saltwater Disposal Well - Permit No.:					
Spot Location: feet from N / S Line					
feet from E / W Line	Legal Description of Lease:				
Enhanced Recovery Project Permit No.:	T035S - R037W: SEC 002 SW4, NW4, NE4, SE4				
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. II Drill Pit, WO or Haul)	teet from F / W Line of Section				
Type of Pit: Emergency Burn Settling					
	<u> </u>				
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	1 130HC.				
The street, sale of the troubles, 17, 17, 1822	Oil / Gas Purchaser: ONEOK FIELD SERVICES				
	Date: 08/15/2014				
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titzwater				
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 al	bove 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:				
112211	UEC 0 4 2014 DEC 0 1 711 14				
DISTRICT EPR New Operator New Operator	PRODUCTION District				
mail to. 1 doi Operator	Usinci				

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#### Side Two

#### Must Be Filed For All Wells

* Lease Name:	PIPER	• Location: 2 35 37WSW					
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)		
13 INF	15189221420000 🗸	660FSL /	660FEL	н	ACTIVE		
			FEL/FWL				
		FSL/FNL					
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		•		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
***************************************		FSL/FNL	FEL/FWL				
	The state of the s	FSL/FNL	FEL/FWL				
· · · · · · · · · · · · · · · · · · ·		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		***************************************		
***************************************		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		44		
		FSL/FNL	FEL/FWL		-		
W-W-W		FSL/FNL	FEL/FWL				
		FSUFNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSUFNL	FEL/FWL				
		FSUFNL	FEL/FWL				
***************************************		FSL/FNL	FEL/FWL				
		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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### 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 # 32864 Name: XTO ENERGY INC.		Well Location: SW	Sac 2	т 35	c n	37	Eas <mark>/K</mark> West
Address 1: 210 PARK AVENUE, SUITE 2350		County:Stevens	_ Sec. <u>-</u>	_ twp. <u></u>	5. R.	******	Easiwest
Address 2:		Lease Name: PIPE	R			Woll ±	⊭.13 INF
City: OKLAHOMA CITY State: OK Zip: 731	0.2						
Contact Person: BRENDA WALLER		the lease below:				er ure	regar description or
Phone: ( 405 319-3259 Fax: ( )		T035S - R037W: SEC 002 SW4, NW4, NE4, SE4					
Email Address: BRENDA_WALLER@XTOENERGY.COM	1						
Surface Owner Information:			-				
Name: See Attached		<b>Wh</b> en filing a Form T	1 involving	multiple su	irface ow	ners, .	attach an additional
Address 1:		sheet listing all of the owner information ca	e informatio	n to the let	t for each	i surta	ace owner. Surtace
Address 2:		county, and in the rea					
City: State: Zip:	+						
are preliminary non-binding estimates. The locations i Select one of the following:	may be entered on the	Form C-1 plat, Fo	rm CB-1 p	lat, or a se	eparate j	olat m	nay be submitted.
I certify that, pursuant to the Kansas Surface owner(s) of the land upon which the subject v CP-1 that I am filing in connection with this for form; and 3) my operator name, address, phore	vell is or will be locate m; 2) if the form being	ed: 1) a copy of the filled is a Form C-	Form C-	I, Form C	B-1, Fo	rm T-	1, or Form
I have not provided this information to the surfactor will be required to send this information task, I acknowledge that I am being charged a	to the surface owner(	s). To mitigate the	additiona	cost of t	he KCC	perfo	orming this
If choosing the second option, submit payment of the form and the associated Form C-1, Form CB-1, Form	\$30.00 handling fee t T-1, or Form CP-1 will	with this form. If th be returned.	ne fee is no	ot receive	d with th	iis for	m, the KSO <b>NA</b> -1
I hereby certify that the statements made herein are tr	ue and correct to the	pest of my knowled	dge and be	elief.			
Date: Signature of Operator or Ager	nt: Tim Welch		Tit	le: Vice	Presider	nt-Lar	nd
API # :15189221420000	KDOR #222034			-			

### **Surface Owners**

API#: 151892	221420000	Lease Name: PIPER		Well # <u>13 INF</u>
Owner Name:	MANLEY FAM TR ET	AL		
Address:	4546 APACHE RD N	<b>=</b>		
City:	PIEDMONT	State: OK	Zip: 73078-9142	
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:	