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: | PIAEIONAA | | |
|--|--|--|--|
| 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.: 219904 | | |
| Gas Gathering System: | Lease Name: PLOWMAN | | |
| Saltwater Disposal Well - Permit No.: | | | |
| Spot Location: feet from N / S Line | Legal Description of Lease: | | |
| feet from E / W Line | T032S - R034W: SEC 007 All | | |
| Enhanced Recovery Project Permit No.: | 10323 - NOS444. SEG 007 All | | |
| Entire Project: Yes No | | | |
| Number of Injection Wells ** | County: Seward | | |
| 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. If Drill Pit, WO or Haul) | teet from E / W Line of Section | | |
| Type of Pit: Emergency Burn Settling | Haul-Off ☐ Workover ☐ Drilling | | |
| 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: Tim Welch | | |
| New Operator's License No. 33999/ | 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: | | |
| | 0014510044 | | |
| Title: REGULATORY COMPLIANCE SUPERVISOR | Date: U8/15/2014 Signature: Nancy Titgoater | | |
| Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the | n Commission. This acknowledgment of transfer pertains to Kansas Corporation | | |
| 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: | | |
| | NOV 2 5 2014 NOV 2 5 7.014 | | |
| DISTRICT EPR //-2/-/ | PRODUCTION UIC | | |
| Mail to: Past Operator New Opera | ator District | | |

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Side Two

Must Be Filed For All Wells

| * Lease Name: | PLOWMAN | * Location: 7 32 34WNW | | | |
|------------------------------------|---|---|--|-----------------------------------|---|
| 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) |
| A13 INF | 15175209700001 / | 4620FSL | 4620FEL | н | ACTIVE |
| | | | ACCUSED AND AND DESCRIPTION OF THE PERSON OF | | |
| | | FSL/FNL | FEL/FWL | | |
| | | FSL/FNL | FEL/FWL | | |
| | 444 | FSL/FNL | FEL/FWL | | |
| | | FSL/FNL | FEUFWL | | |
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| | | FSL/FNL | FEL/FWL | ale 4004 | |
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| | | FSL/FNL | FEL/FWL | | |
| | | FSL/FNL | FEL/FWL | | |
| | | FSL/FNL | FEL/FWL | | |
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| W-1 | | | | | |
| | | | | | |

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 #:15175209700001

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.

| OPERATOR: License # 32864 | _ Well Location: | | | |
|---|---|--|--|--|
| Name: XTO ENERGY INC. | | | | |
| Address 1: 210 PARK AVENUE, SUITE 2350 | County:Seward | | | |
| Address 2: | Lease Name: PLOWMAN Well #:A13 INF | | | |
| City: OKLAHOMA CITY State: OK Zip: 73102 + | | | | |
| Contact Person: BRENDA WALLER | the lease below: T032S - R034W: SEC 007 All | | | |
| Phone: (405 319-3259 Fax: () | | | | |
| 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 sheet listing all of the information to the left for each surface owner. Surface | | | |
| Address 1: | 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: State: Zip: + If this form is boing submitted with a Form C-1 (Intent) or CR-1 (Ca | | | | |
| If this form is being submitted with a Form C-1 (Intent) or CB-1 (Ca the KCC with a plat showing the predicted locations of lease roads, t are preliminary non-binding estimates. The locations may be entered. Select one of the following: X 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 filling in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, face. | thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. e Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the being filed is a Form C-1 or Form CB-1, the plat(s) required by this k, and email address. I acknowledge that, because I have not provided this information, the | | | |
| If this form is being submitted with a Form C-1 (Intent) or CB-1 (Ca the KCC with a plat showing the predicted locations of lease roads, t are preliminary non-binding estimates. The locations may be entered Select one of the following: X 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 filling in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, face of this information to the surface owner(s). KCC will be required to send this information to the surface. | thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. e Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the being filed is a Form C-1 or Form CB-1, the plat(s) required by this k, and email address. | | | |
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| If this form is being submitted with a Form C-1 (Intent) or CB-1 (Ca the KCC with a plat showing the predicted locations of lease roads, t are preliminary non-binding estimates. The locations may be entere Select one of the following: X Certify that, pursuant to the Kansas Surface Owner Notic 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 for form; and 3) my operator name, address, phone number, face I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand. | thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. e Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this k, and email address. I acknowledge that, because I have not provided this information, the electrical coverage of the KCC performing this ling fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned. | | | |

KDOR #219904

Surface Owners

| API#: 151752 | 209700001 | Lease Name: PLOWMAN | | Well # A13 INF | | | |
|--|------------|---------------------|------------|----------------|--|--|--|
| | | | | | | | |
| Owner Name: DAVIS, HARRY E FAM TR; IONA FAM TR | | | | | | | |
| Address: | 1220 RD 19 | | | | | | |
| City: | MOSCOW | State: KS | Zip: 67952 | | | | |
| 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: | • • | | | |