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.

	or District
DISTRICT EPR / 2 - 4 - 14	PRODUCTION DEC 0 5 2014 UIC DEC 0 5 201
Date:	Date:
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action:	the new operator of the above named lease containing the surface pit permitted by No.:
is acknowledged as	is acknowledged as
Commission records only and does not convey any ownership interest in the	above injection well(s) or pit permit.
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation	authorization, surface pit permit # has been Commission. This acknowledgment of transfer pertains to Kansas Corporation
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titzwater
	Date: 08/15/2014
600 Travis Street, Suite 5100 Houston, TX 77002	Oil / Gas Purchaser: ONEOK FIELD SERVICES
New Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4000
New Operator's License No. 33999 -	Contact Person: NANCY FITZWATER
Title: Vice President-Land	Signature: Tim Welch
210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102	Date: 08/15/2014
Past Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259
Past Operator's License No. 32864 '	Contact Person: BRENDA WALLER
(API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from ☐ E / ☐ W Line of Section ☐ Haul-Off ☐ Workover ☐ Drilling 火೩
Surface Pit Permit No.:	feet from N / S Line of Section
** Side Two Must Be Completed.	Injection Zone(s):
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
Number of Injection Wells **	County:Stevens
Entire Project: Yes No	
feet from E / W Line	Legal Description of Lease: T032S - R036W: SEC 017 NE4, SW4, NW4, SE4
Spot Location: feet from N / S Line	
Saltwater Disposal Well - Permit No.:	Lease Name: RATCLIFF
Gas Gathering System:	No Dept of Nevertue Lease No
Oil Lease: No. of Oil Wells	Effective Date of Transfer:
Check Applicable Boxes:	Effective Date of Transfer 8/15/2014

Side Two

Must Be Filed For All Wells

Lease Name:	RATCLIFF		^ Location:	7 32 36WSE	
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	15189001300000	2540 FSL 2640FSL	2540 FEL 2640FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
				vannaki findari orto i koloni finda orto van	
			FEL/FWL		
		154			
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		. <u> </u>
		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.

API # :15189001300000

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 Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)				
OPERATOR: License #32864	Well Location:				
Name: XTO ENERGY INC.					
Address 1: 210 PARK AVENUE, SUITE 2350	County:Stevens				
Address 2:	Lease Name: RATCLIFF Well #:1				
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below:				
Contact Person: BRENDA WALLER					
Phone: (405 319-3259 Fax: ()	T032S - R036W: SEC 017 NE4, SW4, NW4, SE4				
Email Address: BRENDA_WALLER@XTOENERGY.COM					
Surface Owner Information: Name: See Attached	When filling 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: State: Zip:+					
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Select one of the following: X Certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface					
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	eing filed is a Form C-1 or Form CB-1, the plat(s) required by this				
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling for	er(s). To mitigate the additional cost of the KCC performing this				
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-1	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.				
I hereby certify that the statements made herein are true and correct to the	he best of my knowledge and belief.				
Date: Signature of Operator or Agent:	Title: Vice President-Land				

KDOR #203332

Surface Owners

API#: 151890	001300000	Lease Name:	RATCLIFF		Well # <u>1</u>
Owner Name:	MCDONALD, RETA	JUNE			
Address:	706 RIDGEWAY				
City:	PRATT	Stat	e: KS	Zip: 67124	
Owner Name:					
Address:					
City:		Stat	e:	Zip:	
Owner Name:					
Address:					
City:		Stat	e:	Zip:	
Owner Name:					
Address:					
City:		State	e:	Zip:	
Owner Name:					
Address:					
City:		State	e:	Zip:	
Owner Name:					
Address:					
City:		State	2:	Zip:	