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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 submit	tted 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.: 220291 ✓		
Gas Gathering System:	Lease Name: STAMLER		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	The Second Section of		
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T032S - R038W: SEC 031 E2 SEC 035 SW4		
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. it Drill Pit, WO or Haul)			
- On Continue Cottline	teet fromE /W Line of Section		
Type of Pit: Emergency Burn Settling	_ Haul-Off		
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	Tim Welch		
Title:	Signature:		
New Operator's License No. 33999 /	Contact Person: NANCY FITZWATER		
New Operator's Name & Address: LINN OPERATING, INC.	Phone:		
600 Travis Street, Suite 5100 Houston, TX 77002	Oil / Gas Purchaser: ONEOK FIELD SERVICES		
	Date: 08/15/2014		
	UMIU.		
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Tazwater		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been		
	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the			
			
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 2011		
DISTRICT EPR _/2-/- /4	PRODUCTION DEC 0 2 2014 UIC U Z 2014		
Mail to: Past Operator New Operator	tor District		

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Side Two

Must Be Filed For All Wells

*Lease Name: STAMLER		* Location: 35 32 38WSW			
Well No.	API No. (YR DRLD/PRE '67)		Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)
13 INF	15189218920000 /	1250FSL	FWV 1250FEL	н	ACTIVE
			FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	•	FSL/FNL	FEL/FWL	***************************************	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
	•	FSU/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSUFNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		w
		FSL/FNL	FEL/FWL	***************************************	41-04-04-1-1-1
		FSL/FNL	FEL/FWL		
All Marketines and the second		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		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.

Select the corresponding form being filed: C-1 (Intent) CB-	I (Cathodic 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:	CTANI CD			
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal descript			
Contact Person: BRENDA WALLER	the lease below: T032S - R038W: SEC 031 E2 SEC 035 SW4			
Phone: (405 319-3259 Fax: ()	10325 - R036W: SEC 031 E2 SEC 035 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:	county, and in the real estate property tax records of the county treasurer.			
City:				
	nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.			
I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface ctask, I acknowledge that I am being charged a \$30.00 handling.	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ng fee, payable to the KCC, which is enclosed with this form.			
If choosing the second option, submit payment of the \$30.00 handlin form and the associated Form C-1, Form CB-1, Form T-1, or Form CF	g fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.			
I hereby certify that the statements made herein are true and correct	· · · · · · · · · · · · · · · · · · ·			
Date: Signature of Operator or Agent: <i>Tim Well</i>	Title: Vice President-Land			
API # :15189218920000 KDOR #220291				

Surface Owners

API#: 151892	218920000	Lease Name: STAMLER		Well # <u>13 INF</u>			
Owner Name: BARNARD, JOHN T REV LIV TR TTEE ETAL							
Address:	1307 MAPLE DR						
City:	GROVE	State: OK	Zip: 74344-2705				
Owner Name:							
Address:							
City:		State:	Zip:				
Owner Name:							
Address:							
City:		State:	Zip:				
Owner Name:							
Address:							
City:		State:	Zip:				
Owner Name:							
Address:		6 1-1-1	-				
City:		State:	Zip:				
Owner Name:							
Address:							
City:		State:	Zip:				