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:	iea 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.: 122935 AM 208354 Lease Name: STATTON			
Gas Gathering System:				
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 - R036W: SEC 007 NE4, SE4, E2 SW4, E2 NW4 (NWNW) (SWNW) (NWSW) (SWSW)			
Entire Project: Yes No	(Strictly) (Strate)			
Number of Injection Wells **	County: Stevens			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE			
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section			
	feet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off ☐ Workover ☐ Drilling 火서			
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. 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: ONEOK FIELD SERVICES			
	00/45/0044			
	Date: 08/15/2014			
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titzprater			
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 records only and does not convey any ownership interest in the a				
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.:			
Data	D			
Date:	Date:			
12 (11)	PRODUCTION DEC 0 2 2014 DEC 0 2 2014			
Mail to: Past Operator New Operator	10000000			

Side Two

Must Be Filed For All Wells

Lease Name	STATTON	* Location: 7 35 36WNE			
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)
24	15189207860001/	4620FSL	600FEL	GAS	SHUT-IN
water to the same of the same					
		FSL/FNL	FEL/FWL		***
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
,					
	AUMAN				
<u>.</u>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	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

^{*}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#:15189207860001

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 (Cd	athodic Protection Borehole Intent) 🗵 T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License #	Well Location:
Surface Owner Information: Name: See Attached Address 1:	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 owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodi the KCC with a plat showing the predicted locations of lease roads, tank that are preliminary non-binding estimates. The locations may be entered on a Select one of the following: X Certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be located CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, and	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. It (House Bill 2032), I have provided the following to the surface sated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form pling 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 fe	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	ne best of my knowledge and belief.
Date: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land

KDOR #122935

Surface Owners

API#: 151894	207860001	Lease Name: STATION		weii # <u>Z4</u>
Owner Name:	GOOCH, JAMES & N	IINA		
Address:	214 E SECOND			
City:	HUGOTON	State: KS	Zip: 67951-2507	
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:	