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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	itted with this form.		
Oil Lease: No. of Oil Wells"	Effective Date of Transfer: 8/15/2014		
X Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:208489		
Gas Gathering System:	Lease Name: SWISHER		
Saltwater Disposal Well - Permit No.:	20 2711		
Spot Location:feet from N / S Line			
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T033S - R037W: SEC 001 S2 SEC 012 N2		
Entire Project: Yes No			
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):		
Date of Branch M			
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet fromN / S Line of Section		
	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling ビル		
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 Wolch		
Title:	Signature:		
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		
	Date: 08/15/2014		
THE DECLINATION COMPLIANCE OF THE PROPERTY OF			
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Tugoator		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #has been		
noted, approved and duly recorded in the records of the Kansas Corporation	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the	above 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:		
Authorized Signature	DEC 0 1 2014 Authorized Signature		
DISTRICT EPR	PRODUCTION DEC 0 1 2014 DEC 0 1 2014		
Mail to: Past Operator New Operate	or District		

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Side Two

Must Be Filed For All Wells

* Lease Name	SWISHER		Location: 1 33 37WSW			
Well No.	API No. (YR DRLD/PRE 167)		Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned	
12	15189204540000 /	1320FSL	3960FEL	GAS	ACTIVE	
		Military and an analysis and a				
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	11		
		FSL/FNL	FEL/FWL			
	-	FSL/FNL	FEL/FWL	****		
· · · · · · · · · · · · · · · · · · ·		FSL/FNL	FEL/FWL			
		FSUFNL	FEL/FWL			
-12		FSL/FNL	FEL/FWL		*	
		FSL/FNL	FEL/FWL		t	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSUFNL	FEL/FWL		· ·	
	***************************************	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		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-1	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:	Lease Name: SWISHER Well #:12				
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal descript				
Contact Person: BRENDA WALLER	the lease below: T033S - R037W: SEC 001 S2 SEC 012 N2				
Phone: (405 319-3259 Fax: ()	10000 - N007 W. SEC 001 32 SEC 012 N2				
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:					
the KCC with a plat showing the predicted locations of lease roads, tandare preliminary non-binding estimates. The locations may be entered of Select one of the following:	k batteries, pipelines, and electrical lines. The locations shown on the plat n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.				
	ocated: 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				
I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface ov task, I acknowledge that I am being charged a \$30.00 handling	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this lifee, payable to the KCC, which is enclosed with this form.				
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-	fee 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 best of my knowledge and belief.				
Date: 8/15/2014 Signature of Operator or Agent: Tim Welch	Title: Vice President-Land				
API # :15189204540000 KDOR #208489					

Surface Owners

API#: 151892	204540000	Lease Name: SWISHER		Well # <u>12</u>				
Owner Name: WILLIAMS, ROBERT W & BARBARA J								
Address:	601 S DRURY LN							
City:	OLATHE	State: KS	Zip: 66061					
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:					