

## 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:	I		
Oil Lease: No. of Oil Wells***	Effective Date of Transfer: 8/15/2014  KS Dept of Revenue Lease No.: 203979		
Gas Lease: No. of Gas Wells			
Gas Gathering System:	Lease Name: _ TILFORD C		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	, tumpus tumbus		
feet from E / W Line	Legal Description of Lease: T032S - R036W: SEC 011 SW4, NW4, NE4, SE4		
Enhanced Recovery Project Permit No.:	10323 - R03099: SEC 011 3994, N994, NE4, SE4		
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. if Drill Pit, WO or Haul)	teet from  E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KA		
Past Operator's License No32864 <	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:		
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		
000 Havis office, outcomounted, 12.1.552	0014 51004 4		
	Date: 08/15/2014		
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Fitgoater		
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.:	permitted by No.:		
Date:	Date: Authorized Signature		
DISTRICT EPR _//-2.5-/4	PRODUCTION NOV 2 6 2014 NOV 2 6 2014		
Mail to: Past Operator New Opera	tor District		

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#### Side Two

#### Must Be Filed For All Wells

' Lease Name	TILFORD C		* Location: 11 32 36WSE		
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Section Line rom South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/Ta'D/Abandoned)
1	15189001240000 /	2467 F3L	2434FEL 2310EEL	GAS	ACTIVE
		annos .			
		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		
		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		

A separate sheet may be attached if necessary

<sup>\*</sup> 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 med 5-7 (mail)5-7 (mail)	Cathodic Protection Borel	hole Intent) X T-1 (Transfer)	CP-1 (Plugging Application)		
OPERATOR: License # 32864 Name: XTO ENERGY INC.	Well Location:	SE Sec. 11 Twp.32	S. R. 36 Eas West		
Address 1: 210 PARK AVENUE, SUITE 2350	County: Stevens				
Address 2:	Lease Name:	TILFORD C	Well #:1		
City: OKLAHOMA CITY State: OK Zip: 73102 + Contact Person: BRENDA WALLER	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:				
Phone: ( 405 319-3259 Fax: ( )	T032S - R036W:	T032S - R036W: SEC 011 SW4, NW4, NE4, SE4			
Email Address: BRENDA_WALLER@XTOENERGY.COM					
Surface Owner Information:         Name:       See Attached         Address 1:	sheet listing all c owner informatio	of the information to the left on can be found in the reco	rface owners, attach an additional t for each surface owner. Surface rds of the register of deeds for the ecords of the county treasurer.		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathothe KCC with a plat showing the predicted locations of lease roads, tan are preliminary non-binding estimates. The locations may be entered of Select one of the following:  X   Certify that, pursuant to the Kansas Surface Owner Notice A	k batteries, pipeline on the Form C-1 plat Act (House Bill 203	s, and electrical lines. The plat, or a second control of the cont	he locations shown on the plat eparate plat may be submitted.  following to the surface		
owner(s) of the land upon which the subject well is or will be I CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	located: 1) a copy o being filed is a Forr	of the Form C-1. Form C	B-1, Form T-1, or Form		
I have not provided this information to the surface owner(s). La KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling	wner(s). To mitigate	e the additional cost of t	he KCC performing this		
If choosing the second option, submit payment of the \$30.00 handling	g fee with this form. -1 will be returned.	If the fee is not receive	d with this form, the KSONA-1		
form and the associated Form C-1, Form CB-1, Form T-1, or Form CP					
I hereby certify that the statements made herein are true and correct to Date:    Signature of Operator or Agent:   Tim Ovelar   Tim Ov		owledge and belief.			

KDOR #203979

API#:15189001240000

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### **Surface Owners**

API#: 151890	001240000	Lease Name: TILFORD C		Well # <u>1</u>	
Owner Name:	MOSS FARM LLC				
Address:	147301 CALIBER DE	R STE 300			
City:	OKLAHOMA CITY	State: OK	Zip: 73134		
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:			<b>-</b> •		
City:		State:	Zip:		