081514_W_Kuhn_C3.pdf

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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:	nea with this toria.
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.: 214795
Gas Gathering System:	Lease Name: W KUHN
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	tunned buttery
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T030S - R035W: SEC 035 W2 NE4, E2 NE4, W2 SE4, E2 SE4, SW4, NW4
Entire Project: Yes No	,
Number of Injection Wells **	County: Grant
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
** 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
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: WGP-KHC LLC
	00/47/0044
	Date: 08/15/2014
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Ftigwater
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. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the a	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	Authorized Signature 0 0 0 1 4
DISTRICT EPR PI	PRODUCTION NOV 1 8 2014 UIC 18 2014
Mail to: Past Operator New Operator	r District

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Side Two

Must Be Filed For All Wells

Lease Name	, W KUHN		* Location: 38	5 30 35WSW	
Lease Naille			Location:		
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
C3	15067206250001/	1980FSL	4620FEL	GAS	ACTIVE
· · · · · · · · · · · · · · · · · · ·			<u> </u>		
		FSL/FNL	FEL/FWL		
#11 house		FSL/FNL	FEL/FWL		
	***	FSL/FNL	FEL/FWL		
	W. C.	FSL/FNL	FEL/FWL	Are three of the form of the color.	
		FSL/FNL	FEL/FWL	410040000000000000000000000000000000000	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	· · · · · · · · · · · · · · · · · · ·	
		FSL/FNL	FEL/FWL	***************************************	
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		FSL/FNL	FEL/FWL	***************************************	
		FSL/FNL	FEL/FWL	THE REAL PROPERTY OF THE PROPE	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
				- And the second	
		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 (Ca	nthodic Protection Bore	hole Intent) 🗓 T-	1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #32864 Name:XTO ENERGY INC. Address 1:210 PARK AVENUE, SUITE 2350 Address 2:	Well Location: County:Grant Lease Name:		Twp.30 S. R. 35 East West Well #:C3			
City: OKLAHOMA CITY State: OK Zip: 73102 + Contact Person: BRENDA WALLER Phone: (405 319-3259 Fax: () Email Address: BRENDA_WALLER@XTOENERGY.COM	It filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: T030S - R035W: SEC 035 W2 NE4, E2 NE4, W2 SE4, E2 SE4, SW4, NW4					
Surface Owner Information: Name: See Attached 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 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 are preliminary non-binding estimates. The locations may be entered on Select one of the following: X Certify that, pursuant to the Kansas Surface Owner Notice Acowner(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 be	batteries, pipeline the Form C-1 plat t (House Bill 203 cated: 1) a copy o	s, and electrica t, Form CB-1 pla 2), I have prov of the Form C-1	I lines. The locations shown on the plat at, or a separate plat may be submitted. aided the following to the surface . Form CB-1, Form T-1, or Form			
form; and 3) my operator name, address, phone number, fax, an 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 f	d email address. knowledge that, b ner(s). To mitigate	ecause I have the additional	not provided this information, the 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. will be returned.	If the fee is no	nt received with this form, the KSONA-1			
I hereby certify that the statements made herein are true and correct to t	he best of my kno	owledge and be	elief.			
Date: Signature of Operator or Agent: Tim OWelch		Tit	e: Vice President-Land			

KDOR #214795

API#:15067206250001

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Surface Owners

API#: 150672	206250001	Lease Name: W KUHN		Well # <u>C3</u>	
Owner Name:	ANTHONY, KELL	Y S & TERESA D			
Address:	6607 HWY 190				
City:	SATANTA	State: KS	Zip: 67870		
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:		