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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.: 204279		
Gas Gathering System:	Lease Name: WILLIAMS		
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.:	T027S - R037W: SEC 030 E2 SW4, E2 NW4, E2 (NWNW) (SWNW) (NWSW) (SWSW)		
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.:	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:		
New Operator's License No. 33999 1	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 Tuzwater		
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.:		
Date:	Date:		
Authorized Signature	Authorized Signature 0 0011		
DISTRICT EPR //-/7-/4 P	PRODUCTION NOV 1 8 2014 NUV 18 2014		
Mail to: Past Operator New Operator	r District		

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#### Side Two

#### Must Be Filed For All Wells

KDOR Leas	e No.: 204279				
* Lease Name	WILLIAMS		* Location: 30	) 27 37WSE	
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)
3	15067003430000 /	2440 FSL 2000FNL	2440FEL 2500FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
****		FSUFNL	FEL/FWL		
***************************************		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	AAAMAAAAAAAAAA	
	***************************************	FSL/FNL	FEUFWL		
·		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		
#164W4		FSL/FNL	FEL/FWL		
444		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FOL 718			
					•
				the state of the s	
	·				
•			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 filed: C-1 (Intent) CB-1 (C	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License #	Well Location: SESec30Twp.27S. R. 37East West  County:Grant  Lease Name: WILLIAMS		
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.		
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered or Select one of the following:    X	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 ow task, I acknowledge that I am being charged a \$30.00 handling	cknowledge that, because I have not provided this information, the /ner(s). To mitigate the additional cost of the KCC performing this fee, 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 1 will be returned.		
I hereby certify that the statements made herein are true and correct to  Date: Signature of Operator or Agent: Welch			

KDOR #204279

API#:15067003430000

### **Surface Owners**

API#:150670	003430000	Lease Name: WILLIAMS		Well # <u>3</u>	
	<del></del> -				
Owner Name:	WILLIAMS, DONALD				
Address:	1025 W NEBRASKA	AVE			
City:	ULYSSES	State: KS	Zip: 67880		
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:		