RECEIVED AUG 20 2014 KCC WICHITA

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:	0/45/0044		
Oil Lease: No. of Oil Wells**	Effective Date of Transler: 8/15/2014		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 220344		
Gas Gathering System:	Lease Name: WILLIAMS		
Saltwater Disposal Well - Permit No.:	NW Sec. 31 Twp. 27 R. 37W FEXW		
Spot Location:feet from N / S Line	Legal Description of Lease:		
feet from E / W Line	T027S - R037W: SEC 031 E2 NW4, E2 SW4, SE4, NE4 (NWNW)		
Enhanced Recovery Project Permit No.:	(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.: (API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover Drilling		
Past Operator's License No. 32864	Confidence Ferson.		
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:		
22000	Contact Person: NANCY FITZWATER		
New Operator's License No. 33999	Contact Feison.		
New Operator's Name & Address: LINN OPERATING, INC.	Phone:		
600 Travis Street, Suite 5100 Houston, TX 77002	Oil / Gas Purchaser: ONEOK FIELD SERVICES		
	Date: 08/15/2014		
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titgoater		
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
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 pi		
Permit No.: Recommended action:	permitted by No.:		
	Date:		
Date:	Date:		
	PRODUCTION NOV 2 5 2014 NUV 2 5 2014		
	tor District		

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Side Two

Must Be Filed For All Wells

Lease Name	: WILLIAMS		* Location: 31 27 37WNW			
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
46 INF	15067213390000/	4033 FSL	3712 FEL 1250EWL	н	ACTIVE	
			FEL/FWL			
					Address of the second of the s	
		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			
			FEL/FWL			
		FSL/FNL	FEL/FWL			
2.300						
				4.4.0		
		FSL/FNL	FEL/FWL	<u> </u>		

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.

RECEIVED AUG 20 2014 **KCC WICHITA**

API#:15067213390000

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.

OPERATOR: License # 32864	Well Location:			
Name: XTO ENERGY INC.	NW Sec. 31 Twp.27 S. R. 37 East West			
Address 1: 210 PARK AVENUE, SUITE 2350				
Address 2:	Lease Name: WILLIAMS Well #:46 INF			
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal description			
Contact Person: BRENDA WALLER	the lease below:			
Phone: (405 319-3259 Fax: ()	T027S - R037W: SEC 031 E2 NW4, E2 SW4, SE4, NE4 (NWNW) (SWNW) (NWSW) (SWSW)			
Email Address: BRENDA_WALLER@XTOENERGY.COM				
Surface Owner Information:				
Name: See Attached	When filling a Form T-1 involving multiple surface owners, attach an additional			
Address 1:				
Address 2:				
City: State: Zip:+ If this form is being submitted with a Form C-1 (Intent) or CB-1 (C				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (C				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (C the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be enter Select one of the following: X	Cathodic Protection Borehole Intent), you must supply the surface owners and at tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. This is a separate plat may be surface. The plat is a separate plat may be surface. The plat is a separate plat may be surface. The plat is a separate plat may be surface. The plat is a separate plat may be surface.			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (C the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be enter Select one of the following: X Certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form I have not provided this information to the surface owner(s) KCC will be required to send this information to the surface.	Cathodic Protection Borehole Intent), you must supply the surface owners and a tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. This is a separate plat may be surface. The plat is a separate plat may be surface. The plat is a separate plat may be surface. The plat is a separate plat may be surface.			
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Surface Owners

API#: <u>150672</u>	213390000	Lease Name: WILLIAMS		Well # <u>46 INF</u>						
Owner Name:	wner Name: BAUGHMAN FOUNDATION INC									
Address:	PO BOX 1356									
City:	LIBERAL	State: KS	Zip: 67901							
Owner Name:										
Address:		,								
City:		State:	Zip:							
Owner Name:										
Address:										
City:		State:	Zip:							
Owner Name										
Owner Name: Address:										
City:		State:	Zip:							
City.		State.	- .p.							
Owner Name:										
Address:										
City:		State:	Zip:							
Owner Name:										
Address:										
City:		State:	Zip:							