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,
MIST be submitted with this form.

| Gil Lease: No. of Old Wells   1  | Check Applicable Boxes: MUST be submitted  | led with this form.  |
|--|--|--|
| Gas Gathering System: Spot Location: |  | Effective Date of Transfer:  |
| Sathwater Disposal Well - Permit No. Spot Location:  | Cas Lease. Ito. or Cas trois   | KS Dept of Revenue Lease No.: 220297   |
| Spot Location:   | Gas Gathering System:  | Lease Name: BROWN  |
| Spot Location:   Seel from   N /   S Line   Seel from   E /   W Line   Legal Description of Lease:   T028S - R034W: SEC 019 All  | Saltwater Disposal Well - Permit No.:  | SW Sec. 19 Twp. 25 B. 34W ☐ E X W  |
| Enhanced Recovery Project Permit No.:   Enhanced Recovery Project Permit No.     Enhanced Recovery Project   Yes   No   Number of Injection Wells   No   Number of Injection Wells   Yes   No   Number of Injection Wells   Yes   No   Number of Injection Wells   Yes   No   Number of Injection Panoma Council GROVE   Production Zone(s):   CHASE   Injection Zone(s):   Chase   Contact Person:   CHASE   CHASE   COntact Person:   COntact Pe   | Spot Location: feet from N / S Line  |  |
| Entire Project:  | feet from E / W Line   | [Herm Tourist - The Control of the |
| Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE    Production Zone(s):   | Enhanced Recovery Project Permit No.:  | TO TO THE  |
| Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE  **Side Two Must Be Completed.**  Surface Pit Permit No.:  | Entire Project: Yes No   |  |
| Surface Pit Permit No:    CAPT No. II Drist Pit, WO or Hazil)   Settling   Haul-Off   Workover   Drilling   Like   | · · · · · · · · · · · · · · · · · · ·  | County: Finney   |
| Surface Pit Permit No:    CAPT No. II Drist Pit, WO or Hazil)   Settling   Haul-Off   Workover   Drilling   Like   | Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE  | Production Zone(s): CHASE  |
| Settling    |  | [편] 선생님 바람이 많은 그 이 아름답지 않는 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그   |
| Settling    | Surface Pit Permit No  | feet from N / S Line of Section  |
| Type of Pit: Emergency Burn Settling Haut-Off Workover Drilling LA  Past Operator's License No. 32884 / 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  Title: Vice President-Land Signature: Workow  New Operator's License No. 33999 / Contact Person: NANCY FITZWATER  New Operator's Name & Address: LINN OPERATING, INC. Phone: 281-840-4000  Oil / Gas Purchaser: ONEOK FIELD SERVICES  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR Signature: Workow  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 the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action: Permit No.: Authorized Signature  Date: Authorized Signature  District EPR / 2 - 18 - 14 PRODUCTION DEC 1 9 2014  DISTRICT EPR / 2 - 18 - 14 PRODUCTION DEC 1 9 2014   | (API No. If Drill Pit, WO or Haul)   |  |
| Past Operator's License No. 32884 / 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  Signature: Wice President-Land  Signature: Name & Address: Linn Operating, Inc.  New Operator's License No. 33999 / Contact Person: Nancy FITZWATER  New Operator's Name & Address: Linn Operating, Inc.  600 Travis Street, Suite 5100 Houston, TX 77002  Oil / Gas Purchaser: ONEOK FIELD SERVICES  Date: 08/15/2014  Signature: Signature: New Operator 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 the new operator and may continue to inject fluids as authorized by Permit No:   | The state of the s | <u> </u>   |
| Past Operator's Name & Address: XTO ENERGY INC.  210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102  Title: Vice President-Land  Signature: Signature: Which  Signature: Name & Address: LINN OPERATING, INC.  Phone: 281-840-4000  Oil / Gas Purchaser: ONEOK FIELD SERVICES  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  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 the new operator and may continue to inject fluids as authorized by Permit No: Recommended action: Date: Authorized Signature  Date: Authorized Signature  DISTRICT EPR 12-18-144 PRODUCTION DEC 1 9 2014  | type of Pit:EmergencyburnSeming  | radicoli   |
| Past Operator's Name & Address: XTO ENERGY INC.  210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102  Title: Vice President-Land  New Operator's License No. 33999 / Contact Person: NANCY FITZWATER  New Operator's Name & Address: LINN OPERATING, INC.  600 Travis Street, Suite \$100 Houston, TX 77002  Oil / Gas Purchaser: ONEOK FIELD SERVICES  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  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 the new operator and may continue to inject fluids as authorized by Permit No: Recommended action: Permit No: Authorized Signature  Date: Authorized Signature  PRODUCTION DEC 1 9 2014  DISTRICT EPR 12 - 18 - 14 PRODUCTION DEC 1 9 2014  DISTRICT EPR 12 - 18 - 14 PRODUCTION DEC 1 9 2014  | Past Operator's License No. 32864  | Contact Person:BRENDA WALLER   |
| 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102  Title: Vice President-Land  Signature: Tim Woods  New Operator's License No. 33999 / Contact Person: NANCY FITZWATER  New Operator's Name & Address: LINN OPERATING, INC. Phone: 281-840-4000  Oil / Gas Purchaser: ONEOK FIELD SERVICES  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  Signature: **Signature***  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 records only and does not convey any ownership interest in the above injection well(s) or pit permit.  Is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action: Date: Authorized Signature  Date: Authorized Signature  DISTRICT PRODUCTION PRODUCTION DEC 19_2014 UPEC 19_2014  DISTRICT PRODUCTION PRODUCTION PRODUCTION  |  | Phone: 405-319-3259  |
| New Operator's License No. 33999 / Contact Person: NANCY FITZWATER  New Operator's Name & Address: LINN OPERATING, INC. Phone: 281-840-4000  Oil / Gas Purchaser: ONEOK FIELD SERVICES  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR Signature: Signature: Signature: Phone permit # has been noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.  Is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No: Recommended action: Date:  |  | Deta: 08/15/2014   |
| 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  Title: REGULATORY COMPLIANCE SUPERVISOR Signature: Signature: Signature: Manage Titgenator  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.  |  | Tim Welch  |
| New Operator's Name & Address: LINN OPERATING, INC.  Phone:  | Title: Vice President-Land   | Signature:   |
| New Operator's Name & Address: LINN OPERATING, INC.  Phone:  |  |  |
| New Operator's Name & Address: LINN OPERATING, INC.  Phone:  | New Operator's License No. 33999 /   | Contact Person: NANCY FITZWATER  |
| Oil / Gas Purchaser: ONEOK FIELD SERVICES  Date: 08/15/2014  Title: REGULATORY COMPLIANCE SUPERVISOR  Signature: Signature: Signature  Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #   |  | Phone: 281-840-4000  |
| Date:  |  | ^ [사람보다] - 프로젝트 : : : : : : : : : : : : : : : : : : :  |
| Title: REGULATORY COMPLIANCE SUPERVISOR  Signature: Signature: Signature: Signature  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.   | out Havis Street, Street, Street Housidit, 1X 77002  |  |
| Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #  |  |  |
| 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.   | Title:REGULATORY COMPLIANCE SUPERVISOR   | Signature: Nancy Titgwater   |
| 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.   |  |  |
| 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.   | Acknowledgment of Transfer: The above request for transfer of injection a  | authorization, surface pit permit #has been  |
| Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.   |  |  |
| is acknowledged as  the new operator and may continue to inject fluids as authorized by  Permit No.: Recommended action:  Date:  |  |  |
| the new operator and may continue to inject fluids as authorized by  Permit No.: Recommended action:  Date:  Date:  Authorized Signature  DISTRICT   |  |  |
| the new operator and may continue to inject fluids as authorized by  Permit No.: Recommended action:  Date:  Date:  Authorized Signature  DISTRICT EPR/2 - / 8 - / 4 PRODUCTION DEC DEC  | is acknowledged as   | is acknowledged as   |
| Permit No.:  |  | the new operator of the above named lease containing the surface pit   |
| Date: Date:  |  |  |
| DISTRICT EPR 12-18-14 PRODUCTION DEC 1 9 2014 UN EC 19 2014  | Permit No.: Recommended action:  | permitted by No.:  |
| DISTRICT EPR 12-18-14 PRODUCTION DEC 1 9 2014 UN EC 19 2014  |  |  |
| DISTRICT EPR   | Date:  | ■ 1 · · · · · · · · · · · · · · · · · ·  |
|  |  | PRODUCTION DEC 1 9 2014 IDEC 1 9 2014  |
|  |  |  |

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#### Side Two

#### Must Be Filed For All Wells

| ' Lease Name: | BROWN                        |                                    | * Location: 19                  | 25 34WSW                          |                                     |
|---------------|------------------------------|------------------------------------|---------------------------------|-----------------------------------|-------------------------------------|
| Well No.      | API No.<br>(YR DRLD/PRE '67) | Footage from<br>(i.e. FSL = Feet f | Section Line<br>rom South Line) | Type of Well<br>(Oil/Gas/INJ/WSW) | Well Status<br>(PROD/TA'D/Abandoned |
| 1721          | 15055213990000               | 1250FSL                            | €₩८<br>1250 <b>PE</b> L         | GAS                               | ACTIVE                              |
|               |                              |                                    |                                 |                                   |                                     |
|               |                              | 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                         |                                   |                                     |
|               |                              | 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                         |                                   |                                     |

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.

| OPERATOR: License #  | Well Location:   |
|--|--|
| Name: XTO ENERGY INC.  | SW Sec. 19 Twp.25 S. R. 34East   |
| Address 1: 210 PARK AVENUE, SUITE 2350   | County: Finney   |
| Address 2:   | Lease Name: BROWN Well #:1721  |
| City: OKLAHOMA CITY State: OK Zip: 73102 +   | If filing a Form T-1 for multiple wells on a lease, enter the legal description of   |
| Contact Person: BRENDA WALLER  | the lease below:<br>T025S - R034W: SEC 019 All   |
| Phone: ( 405 319-3259 Fax: ()  |  |
| 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 sheet listing all of the information to the left for each surface owner. Surface  |
| Address 1:   | <ul> <li>owner information can be found in the records of the register of deeds for the</li> </ul>   |
| Address 2:   |  |
| City:++  |  |
| the KCC with a plat showing the predicted locations of lease roads, ta   | nodic Protection Borehole Intent), you must supply the surface owners and<br>ink batteries, pipelines, and electrical lines. The locations shown on the plat<br>on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. |
| owner(s) of the land upon which the subject well is or will be   | Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form n being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.            |
| I have not provided this information to the surface owner(s).  KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handli | acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ng fee, payable to the KCC, which is enclosed with this form.                                     |
| If choosing the second option, submit payment of the \$30.00 handlin<br>form and the associated Form C-1, Form CB-1, Form T-1, or Form C   | ng fee with this form. If the fee is not received with this form, the KSONA-1<br>P-1 will be returned.   |
| I hereby certify that the statements made herein are true and correct  |  |
| Date: Signature of Operator or Agent: Tim Wa   | Title:   |
| API # :15055213990000 KDOR #220297   |  |

### **Surface Owners**

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AUG 20 201

|             | AUG 20 2014 |
|-------------|-------------|
| <u>ners</u> | KCC WICHITA |
| •           |             |

| API#: 150552 | 213990000        | Lease Name: BROWN   |                 | Well # <u>1721</u> |
|--------------|------------------|---------------------|-----------------|--------------------|
|              |                  |                     |                 |                    |
| Owner Name:  | KOSTER, KATHY TI | RUST dated 12/15/06 |                 |                    |
| Address:     | PO BOX 897       |                     |                 |                    |
| City:        | GARDEN CITY      | State: KS           | Zip: 67846-0897 |                    |
|              |                  |                     |                 |                    |
| 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:            |                    |