081514\_Brown\_24-26.pdf

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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: MUST be submit	itted with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 8/15/2014		
X Gas Lease: No. of Gas Wells 1	KS Dept of Revenue Lease No.: 221687		
Gas Gathering System:	Lease Name: BROWN		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from DE / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T025S - R034W: SEC 021 All		
Entire Project: Yes No			
Number of Injection Wells**	County: Finney		
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 Workover Drilling KH		
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	Tim ON Jak		
	Signature:		
New Operator's License No. 33999 7	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		
PECULATORY COMPLIANCE CURENAGO	Signature:		
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Orang Sugmaior		
Acknowledgment of Transfer: The above request for transfer of injection a			
	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the a	loove 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.:		
recommended action:	permitted by No.:		
Pater	Patro a state of the second se		
Date:	Date:		
DISTRICT EPR /2-18-14 P	PRODUCTION DEC 1 9 2014 DEC 1 9 2014		
Mail to: Past Operator New Operator	tita kan arang at terbagai kan arang at manang at manang at titak at manang at titak at manang at titak at tit		

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#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	PPOWN	* Location: 21 25 34WSW			
* Lease Name: Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr	Section Line	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
2426	15055215030001	1250FSL ^	1250FWL′	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		
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		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.

22064					
OPERATOR: License # 32864	Well Location: SW Sec, 21 Twp.25 S. R. 34 East West				
Name: XTO ENERGY INC.	- · · · · · · · · · · · · · · · · · · ·				
Address 1: 210 PARK AVENUE, SUITE 2350	PROWN				
Address 2:					
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 descriptio the lease below:				
	T025S - R034W: SEC 021 All				
Phone: (	_				
Email Address:	_				
Surface Owner Information:					
Name: See Attached	When filing a Form T-1 involving multiple surface owners, attach an additional				
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				
Address 2:	and the second s				
City:	_				
the KCC with a plat showing the predicted locations of lease roads, the are preliminary non-binding estimates. The locations may be enterestimated one of the following:	ank batteries, pipelines, and electrical lines. The locations shown on the plat d 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 CP-1 that I am filing in connection with this form; 2) if the for form; and 3) my operator name, address, phone number, far.  I have not provided this information to the surface owner(s).	I acknowledge that, because I have not provided this information, the				
KCC will be required to send this information to the surface	owner(s). To mitigate the additional cost of the KCC performing this ling fee, payable to the KCC, which is enclosed with this form.				
If choosing the second option, submit payment of the \$30.00 handle form and the associated Form C-1, Form CB-1, Form T-1, or Form C	ling fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.				
I hereby certify that the statements made herein are true and correct	ct to the best of my knowledge and belief.				
Date: Signature of Operator or Agent: \$\int \text{Um ON}	Ach Title: Vice President-Land				
API # :15055215030001 KDOR #22168					

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AUG 20 2014 Surface Owners KCC WICHITA

API#: 150552	215030001	Lease Name: BROWN		Well # <u>2426</u>
Owner Name:	J O CATTLE COMPA	ANY INC		
Address:	РО ВОХ 7			
City:	HOLCOMB	State: KS	Zip: 67851-0007	
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:	7in:	