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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,

Check Applicable Boxes: MUST be subm	nitted with this form.		
Oil Lease: No. of Oil Wells	Effective Date of Transfer: 8/15/2014 KS Dept of Revenue Lease No.: 220246 Lease Name: BROWN		
Gas Lease: No. of Gas Wells **			
Gas Gathering System:			
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.:	T025S - R034W: SEC 011 All		
Entire Project: Yes No			
Number of Injection Wells	County: Finney Production Zone(s): CHASE Injection Zone(s):		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE			
** Side Two Must Be Completed.			
	and the state of t		
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section		
Ari Roll Dill Pi, Wo of Hall)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off ☐ Workover ☐ Drilling ∠↓		
22864			
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 Walch		
	Signature:		
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		
THE PECH ATORY COMPLIANCE CURERY COR			
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titzwater		
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	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:			
Authorized Signature	Date:Authorized Signature		
DISTRICT EPR _/2-/8-14 _P	PRODUCTION DEC 1 9 2014 DEC 1 9 2014		
Mail to: Past OperatorNew Operator			

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Side Two

Must Be Filed For All Wells

* Lease Name: BROWN * Location: 11 25 34WSW					
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Section Line	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
35	15055213980000	1250FSL ~	2695FEL	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			
		FSL/FNL			
		FSL/FNL	FEL/FWL		
		FSL/FNL			
		FSL/FNL			
		FSL/FNL	FEL/FWL		
		FSL/FNL			
TT			the state of the s		

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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API#:15055213980000

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. 11 Twp.25 S. R. 34 East West			
Address 1: 210 PARK AVENUE, SUITE 2350				
Address 2:	DDOWN			
City: OKLAHOMA CITY State: OK Zip: 73102 +				
Contact Person: BRENDA WALLER	the lease below:			
Phone: (405 319-3259 Fax: ()	10255 - R034W. SEC 011 All			
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			
Address 1:	sheet listing all of the information to the left for each surface owner. Surface			
Address 2:				
City:				
If this form is being submitted with a Form C-1 (Intent) or CR-1 (C	Cathodic Protection Borehole Intent), you must supply the surface owners and			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (C	Cathodic Protection Borehole Intent), you must supply the surface owners and stank batteries, pipelines, and electrical lines. The locations shown on the plat			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Counter the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be enterested one of the following: X I certify that, pursuant to the Kansas Surface Owner Norways of the land upon which the subject well is or will	Cathodic Protection Borehole Intent), you must supply the surface owners and stank batteries, pipelines, and electrical lines. The locations shown on the plat ared on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Itice Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Counter the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be entered to be 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 filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number, the counter the surface owner(standard the surface owner).	Cathodic Protection Borehole Intent), you must supply the surface owners and stank batteries, pipelines, and electrical lines. The locations shown on the plat ared on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Itice Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this			
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Surface Owners

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KCC WICHITA

API#: 150552	213980000	Lease Name: BROWN		Well # <u>35</u>
		,		
Owner Name:	TRI-STATE GENERA	ATION AND TRANSMISSION A	SSOC INC	
Address:	PO BOX 33695			
City:	DENVER	State: CO	Zip: 80233-0695	
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:	