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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:** Oil Lease: No. of Oil Wells Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: Gas Gathering System: Lease Name: BROWN Saltwater Disposal Well - Permit No.: 25 _ feet from N / S Line Legal Description of Lease: feet from | E / T025S - R034W: SEC 002 All Enhanced Recovery Project Permit No.: Entire Project: Yes No County: Finney Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE **COUNCIL GROVE** Production Zone(s): ** Side Two Must Be Completed. Injection Zone(s): feet from N / S Line of Section Surface Pit Permit No.: _ (API No. If Drill Pit, WO or Haul) W Line of Section Drilling Haul-Off Workover Burn Settling Type of Pit: Emergency **BRENDA WALLER** Past Operator's License No. 32864 / Contact Person: Phone: 405-319-3259 Past Operator's Name & Address: XTO ENERGY INC. 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102 08/15/2014 Tim Welch Vice President-Land Signature: New Operator's License No. 33999 / NANCY FITZWATER Contact Person: _ New Operator's Name & Address: LINN OPERATING, INC. 281-840-4000 Oil / Gas Purchaser: ONEOK FIELD SERVICES 600 Travis Street, Suite 5100 Houston, TX 77002 08/15/2014 Date: Title: REGULATORY COMPLIANCE SUPERVISOR 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. is acknowledged as is acknowledged as the new operator of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by permitted by No.: Permit No.: ______ . Recommended action: Date: Authorized Signature PRODUCTION DISTRICT __ Mail to: Past Operator_ New Operator

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Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 208407					
* Lease Name:	BROWN		*Location:_2	25 34WNW		
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
67	15055204860000	2320FNL	2310FWL =	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			
o de <u>la companya de la companya de</u> La companya de la co		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		<u>. L. Brat C.A.</u> Garanton L. L. William	
		FSL/FNL				
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			

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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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.					
Address 1: 210 PARK AVENUE, SUITE 2350	County: Finney				
Address 2:	Lease Name: BROWN Well #:67				
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: T025S - R034W: SEC 002 All				
Phone: (
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 owner information can be found in the records of the register of deeds for the				
Address 2:	a state of the sta				
City:	_				
are preliminary non-binding estimates. The locations may be entered. Select one of the following: X certify that, pursuant to the Kansas Surface Owner Notice.	tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The Act (House Bill 2032), I have provided the following to the surface				
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 fo form; and 3) my operator name, address, phone number, fa	pe located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this x, and email address.				
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the cowner(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 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form	ling fee with this form. If the fee is not received with this form, the KSONA- CP-1 will be returned.				
I hereby certify that the statements made herein are true and corre					
Date: Signature of Operator or Agent: Tim O)	Title: Vice President-Land				

Surface Owners

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AUG 20 2014				
KCC WICHITA				

API#: <u>15055</u>	204860000	Lease Name:	BROWN		Well # <u>67</u>
Owner Name:	TRI-STATE GENER	ATION AND TRA	ANSMISSION ASS	SOC INC	
Address:	PO BOX 33695				
City:	DENVER	Sta	te: CO	Zip: 80233-0695	
Owner Name:					
Address:					
City:		Sta	te:	Zip:	
Owner Name:					
Address:					
City:		Sta	te:	Zip:	
Owner Name:					
Address:					
City:		Sta	te:	Zip:	
Owner Name:					
Address:					
City:		Sta	te:	Zip:	
Owner Name:					
Address:					
City:		Stat	te:	Zip:	