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081514_Brown_Farm_2-3.pdf

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION Form 1-1 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 submitte	
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 8/15/2014
X Gas Lease: No. of Gas Wells **	KS Dept of Revenue Lease No.: 208403
Gas Gathering System:	Lease Name: BROWN FARM
Saltwater Disposal Well - Permit No.:	25 _ 34W
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T025S - R034W: SEC 020 All
Entire Project: Yes No	
Number of Injection Wells**	County: Finney
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Type of Pit: Emergency Burn Settling	
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
	Tim Welch
Title: Vice President-Land	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
Title: _REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Fitzwator
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been
noted, approved and duly recorded in the records of the Kansas Corporation C	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.:
FORBERO. FROOTERISING COURT.	
Data	Date:
Date:	Authorized Signature
DISTRICT EPR 12-19-14 F	PRODUCTION DEC 2 2 2014 UILUEU 2 2 7014
Mail to: Past Operator New Operato	or District

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Side Two

Must Be Filed For All Wells

' Lease Name:	BROWN FARM		* Location: 20) 25 34WNW	
Well No.			Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
23	15055204640000 /	1330FNL	1270FWL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
Orașion Bornario de la compositori Propositori		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	FELFWL		
		FSL/FNL			
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL			
		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

^{*}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#:15055204640000

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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (C	sthodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)				
OPERATOR: License # 32864 Name: XTO ENERGY INC. Address 1: 210 PARK AVENUE, SUITE 2350	Well Location: NW Sec. 20 Twp. 25 S. R. 34 East West County: Finney				
Address 2:	Lease Name: BROWN FARM Well #:23				
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 description the lease below: T025S - R034W: SEC 020 All				
Phone: (405 319-3259 Fax: ()					
Email Address: BRENDA_WALLER@XTOENERGY.COM					
Surface Owner Information: Name: See Attached Address 1:	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 owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.				
CP-1 that I am filing in connection with this form; 2) if the form be	catteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. It (House Bill 2032), I have provided the following to the surface lated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ling filed is a Form C-1 or Form CB-1, the plat(s) required by this				
	nowledge that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this				
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1					
I hereby certify that the statements made herein are true and correct to t	ne best of my knowledge and belief.				
Date:Signature of Operator or Agent:	Title: Vice President-Land				
Ogranule of Operator of Agents	THO.				

KDOR #208403

Surface Owners KCC WICHITA

RECEIVED AUG 20 2014 WOODS KCC WICHITA

API#: <u>150552</u>	204640000	Lease Name: _B	ROWN FARM		Well # <u>23</u>
Owner Name	LO CATTLE COMPA	NIV INC			
	J O CATTLE COMPA	INT INC			
Address:	PO BOX 7				
City:	HOLCOMB	State:	KS Z	Zip: 67851-0007	
Owner Name:					
Address:					
City:		State:	Z	Zip:	
Owner Name:					
Address:					
City:		State:	Z	Zip:	
Owner Name:					
Address:					
City:		State:	Z	Zip:	
Owner Name:					
Address:					
City:		State:	Z	Zip:	
Owner Name:					
Address:					
City:		State:	7	7in:	