RECEIVED AUG 20 2014 KCC WICHITA

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 7-1 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 submitted	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 220952			
Gas Gathering System:	Lease Name: BROWN FARM			
Saltwater Disposal Well - Permit No.:	SE Sec. 26 Twp. 24 R. 34W EXW			
Spot Location: feet from N / S Line	Legal Description of Lease:			
feet from E 1 W Line	T024S - R034W: SEC 026 All			
Enhanced Recovery Project Permit No.:				
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.:	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			
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			
Titles Vice President-Land	Signature:			
Title: Vice riesident-Land	Signature.			
New Operator's License No. 33999	Centact 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:			
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			
	permitted by No.:			
Permit No.: Recommended action:	politimod by No.			
	Date:			
Date:	Authorized Signature			
	PRODUCTION DEC 2 2 2014 DIEC 2 2 2014			
Mail to: Past Operator New Operator				

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Side Two

Must Be Filed For All Wells

KDOR Lease * Lease Name:	RPOWN FARM		* Location: 26	6 24 34WSE			
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)	
810 INF	15055214210001	1250FSL <	2500FEL	HI		ACTIVE	
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL	1969 <u>1964 - 196</u> 1			
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
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<u> </u>		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#:15055214210001

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 (Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License #32864	Well Location:
Name: XTO ENERGY INC.	
Address 1: 210 PARK AVENUE, SUITE 2350	County: Finney
Address 2:	Lease Name: BROWN FARM Well #:810 INF
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: T024S - R034W: SEC 026 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
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:	county, and in the real estate property tax records of the county treasurer.
City:	
the KCC with a plat showing the predicted locations of lease roads, tank	edic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
X I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be I CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	
KCC will be required to send this information to the surface owner(s). I a KCC will be required to send this information to the surface owner(s). I acknowledge that I am being charged a \$30.00 handling	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this gree, payable to the KCC, which is enclosed with this form.
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-	fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.
I hereby certify that the statements made herein are true and correct to	
Date: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land
A DI # -15055214210001 KDOR #220952	

Surface Owners KCC WICHITA

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API#: 150552	214210001	Lease Name: BROWN FA	ARM	Well # 810 INF
Owner Name:	IBP, INC			
Address:	TAX DEPT			
City:	SPRINGDALE	State: AR	Zip: 72765-2020	
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:	