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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 submitted.	ted with this form.
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.: 220466
Gas Gathering System:	Lease Name: C HOFFMAN B
Saltwater Disposal Well - Permit No.:	NW_Sec30Twp26R35W EX W
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T026S - R035W: SEC 030 All
Entire Project: Yes No	
Number of Injection Wells**	County: Kearny
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)  Type of Pit:	feet from N / S Line of Section  feet from E / W Line of Section  Haul-Off Workover Drilling
Past Operator's License No. 32864 /	Contact Person: BRENDA WALLER
	Phone: 405-319-3259
Past Operator's Name & Address: XTO ENERGY INC.	00/45/00/4
210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102	Date: 08/15/2014
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: WGP-KHC LLC
	Date: 08/15/2014
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: <u>Nancy Tügvater</u>
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation
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:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR _/2-/8-/4	PRODUCTION DEC 1 9 2014 UBEC 1 9 2014
Mail to: Past Operator New Opera	tor District

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#### Side Two

#### Must Be Filed For All Wells

Lease Name:	C HOFFMAN B		* Location: 30	26 35WNW	
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)
В3	15093214570000 J	1250FNL	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		
		FSL/FNL	FEUFWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNI	FEL/FWL		
		FSL/FNI	FEL/FWI		
		_ FSL/FNI	FEL/FWI		
		FSL/FN	FEL/FWI		

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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (C	athodic Protection Borehole Intent)
OPERATOR: License #	Well Location:
YTO ENERGY INC	NW Sec. 30 Twp.26 S. R. 35 East West
Name: XTO ENERGY INC.  Address 1: 210 PARK AVENUE, SUITE 2350	County: Kearny
	Lease Name: C HOFFMAN B Well #:B3
Address 2:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: BRENDA WALLER	the lease below:
Phone: (	T026S - R035W: SEC 030 All
Email Address: BRENDA_WALLER@XTOENERGY.COM	
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:	county, and in the real estate property tax records of the county treasurer.
City:	
the VCC with a plat showing the predicted locations of lease roads, tank	lic Protection Borehole Intent), you must supply the surface owners and batteries, 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.
X I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loced CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, and	cated: 1) a copy of the Form C-1, Form CB-1, Form I-1, or Form leing filed is a Form C-1 or Form CB-1, the plat(s) required by this
I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling	cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this fee, 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 I will be returned.
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.
Date: 8/15/2014 Signature of Operator or Agent: Tim Wolch	Title: Vice President-Land
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KDOR #220466

API#:15093214570000

## **Surface Owners**

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API#: 150932	214570000	Lease Name	: CHOFFMAN B		Well # <u>B3</u>				
<u> </u>									
Owner Name: GUGELMEYER, DAVID JON & CARYN JEAN									
Address:	241 ROAD T								
City:	LAKIN	St	ate: KS	Zip: 67860					
Owner Name:									
Address:									
		C		<b>7</b> :					
City:		St	ate:	Zip:					
Owner Name:									
Address:									
City:		St	ate:	Zip:					
Owner Name:									
Address:									
City:		St	tate:	Zip:					
Owner Name:									
Address:									
City:		St	tate:	Zip:					
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O N									
Owner Name:									
Address:									
City:		St	tate:	Zip:					