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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	ed with this form.
Oil Lease: No. of Oil Wells***	Effective Date of Transfer: 8/15/2014
X Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 201115
Gas Gathering System:	Lease Name: ELLOITT
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.:	T034S - R038W: SEC 025 NW4, SW4, SE4, NE4
Entire Project: Yes No	
Number of Injection Wells**	County: Stevens
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
** Side Two Must Be Completed.	Injection Zone(s):
	information with the state of t
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 火丸
	PRENDA WALLED
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 Welch
	Contact Parson NANCY FITZWATER
New Operator's License No. 33999	Corract reison.
New Operator's Name & Address: LINN OPERATING, INC.	Phone:
600 Travis Street, Suite 5100 Houston, TX 77002	Oil / Gas Purchaser: ONEOK FIELD SERVICES
	Date: 08/15/2014
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Figuator
TRIE: REGULATORY COMPLIANCE OUT ERVISOR	
Acknowledgment of Transfer: The above request for transfer of injection a	authorization surface pit permit # has been
	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the a	
Commission records only and does not convey any ownership interest in the	
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	PRODUCTION DEC 1 2 2014 UIC 1 2 2014
Mail to: Past Operator New Operator	or District

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#### Side Two

#### Must Be Filed For All Wells

* Lease Name: ELLOITT		* Location: 25 34 38WNE				
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)	
	15189006480000 🗸	2970FSL	2310FEL	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	and Spirit Burning D <del>istrict of the Colorest</del>		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
11		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			

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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API #:15189006480000

#### 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.	weil Location: NE Sec. 25 Twp. 34 S. R. 38 East West			
Address 1: 210 PARK AVENUE, SUITE 2350	County:Stevens			
Address 2:	Lease Name: ELLOITT Well #:1  If filing a Form T-1 for multiple wells on a lease, enter the legal description of			
City: OKLAHOMA CITY State: OK Zip: 73102 +				
Contact Person: BRENDA WALLER	the lease below: T034S - R038W: SEC 025 NW4, SW4, SE4, NE4			
Phone: ( 405 319-3259 Fax: ( )	—			
Email Address: BRENDA_WALLER@XTOENERGY.COM	<b>-</b>			
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 contract to the contract that a contract the contract that are contract to the contract that the con			
City:	_			
the KCC with a plat showing the predicted locations of lease roads, the are preliminary non-binding estimates. The locations may be entered.  Select one of the following:  X I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number, factorized in the surface owner(s).  I have not provided this information to the surface owner(s).  KCC will be required to send this information to the surface.	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this			
task, I acknowledge that I am being charged a \$30.00 hand	ling fee, payable to the KCC, which is enclosed with this form.			
If choosing the second option, submit payment of the \$30.00 handl form and the associated Form C-1, Form CB-1, Form T-1, or Form C				
I hereby certify that the statements made herein are true and correct	ct to the best of my knowledge and belief.			

**KDOR #201115** 

### **Surface Owners**

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API#: <u>151890</u>	006480000	Lease Name: ELLOITT		Well # <u>1</u>	
Owner Name:	RECTOR, WILLIAM 8	L DEBORAH			
Address:	918 ROAD H				
City:	HUGOTON	State: KS	Zip: 67951-5271		
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:		