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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: MUST be submit	tied with this form.		
Oil Lease: No. of Oil Wells***	KS Dept of Revenue Lease No.: 221938		
X Gas Lease: No. of Gas Wells **			
Gas Gathering System:	Lease Name: ELMO LODGE		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	Legal Description of Lease:		
feet from L E / W Line	T034S - R036W: SEC 004 N2 N2, S2 N2, S2		
Enhanced Recovery Project Permit No.:			
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):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	feet from		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KH		
Type of the Entropy Dutie Country			
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	Tim Welch		
Title: vice rresident-Land	Signature:		
New Operator's License No	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 Fitzwater		
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 0	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.		
	and the second of the second o		
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 F	PRODUCTION		
Mail to: Past Operator New Operato	orDistrict		

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Cirls Tree

Must Be Filed For All Wells

KDOR Lease	No.: 221938				
* Lease Name:	ELMO LODGE		* Location: 4	34 36WSW	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
23 INF	15189222090000 🗸	1250FSL_	FWV 1250FEL	: HI	ACTIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		기교교 변기 및 - 기 교
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
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<u>aiki lake</u> j Bulan langgi		FSL/FNL	FEL/FWL		
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	rafo ji iku ji dan <u>ji dana.</u> Tu	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 # 32864	Well Location:		
Name: XTO ENERGY INC.			
Address 1: 210 PARK AVENUE, SUITE 2350	_ County:Stevens		
Address 2:	_		
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description		
Contact Person: BRENDA WALLER	the lease below: T034S - R036W: SEC 004 N2 N2, S2 N2, S2		
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:			
City:++	_		
are preliminary non-binding estimates. The locations may be entered Select one of the following:	ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
owner(s) of the land upon which the subject well is or will be	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this , 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 owner(s). To mitigate the additional cost of the KCC performing this ing 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 C	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.		
I hereby certify that the statements made herein are true and correct	, ,		
a.			
Date: Signature of Operator or Agent:	Title: Vice President-Land		

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Surface Owners

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AUG 20 2014 **KCC WICHITA**

API#: 151892	222090000	Lease Name: ELMO LODGE		_ Well # <u>23 INF</u>
				_
Owner Name:	WALKEMEYER PRO	PERTIES LP, R & L		
Address:	1607 S EISENHOWEI	R		
City:	HUGOTON	State: KS	Zip: 67951-3067	
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 [,]	7in:	