081514_Fredrick_A_Stone_1.pdf

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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:	
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.: 203450
Gas Gathering System:	Lease Name: _FREDERICK A STONE
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.:	T026S - R033W: SEC 019 All
Entire Project: Yes No	[]]. 罗马语的温斯里尼达电视 神光温声息变温 制
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 Drift 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, Wolch
Title: Vice President-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: WGP-KHC LLC
out Travis Street, Street Office Offi	0014510044
	O(O) m
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Fitzwater
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #has been
noted, approved and duly recorded in the records of the Kansas Corporation	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	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.:
Females.	
Data	Date:
Date:	Authorized Signature
DISTRICT EPR /2-/9-/4	PRODUCTION DEG 2 2 2014 DIEC 2 2 2014
Mail to: Past Operator New Opera	ttorDistrict

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Side Two

Must Be Filed For All Wells

203450 KDOR Lease No.: 19 26 33WSE FREDERICK A STONE * Location: * Lease Name: Type of Well (Oil/Gas/INJ/WSW) Well Status Footage from Section Line (i.e. FSL = Feet from South Line) Well No. API No. (PROD/TA'D/Abandoned) (YR DRLD/PRE '67) **ACTIVE GAS** 15055006980000 / 2310FEL 2310FSL FEL/FWL FSL/FNL FEL/FWL FEL/FWL **FSL/FNL** FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FSL/FNL FEL/FWL FEL/FWL FSL/FNL **FEL/FWL** FSL/FNL FEL/FWL FSL/FNL FSL/FNL FEL/FWL FEL/FWL FSL/FNL FSL/FNL FEL/FWL FEL/FWL **FSL/FNL** FEL/FWL FSL/FNL FEL/FWL FSL/FNL FSL/FNL FEL/FWL FEL/FWL FSL/FNL FEL/FWL FSL/FNL

A separate sheet may be attached if necessary

FSL/FNL

FSL/FNL

FSL/FNL

FEL/FWL

FEL/FWL

FEL/FWL

^{*} 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 #	Well Location:
Name: XTO ENERGY INC.	
Address 1: 210 PARK AVENUE, SUITE 2350	County: Finney
Address 2:	Lease Name: FREDERICK A STONE Well #:1
City: OKLAHOMA CITY State: OK Zip: 73102 +	
	10200 11000111
Phone: (405 319-3259 Fax: () Email Address: BRENDA_WALLER@XTOENERGY.COM	
Surface Owner Information:	
Name: See Attached	sheet listing all of the information to the left for each surface owner. Surface
Address 1:	owner information can be found in the records of the register of deeds for the
are transported by the second second transfers of leasen to 200	Cathodic Protection Borehole Intent), you must supply the surface owners and
City: State: Zip:+ If this form is being submitted with a Form C-1 (Intent) or CB-1 (Case reading to the product of lease reading).	Cathodic Protection Borehole Intent), you must supply the surface owners and
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Intent)	Cathodic Protection Borehole Intent), you must supply the surface owners and s, tank batteries, pipelines, and electrical lines. The locations shown on the plat ared on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Itice Act (House Bill 2032), I have provided the following to the surface libe located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Intent) or CB-1 (Intent) are preliminary non-binding estimates. The locations may be enterested to the following: X I certify that, pursuant to the Kansas Surface Owner No owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, I have not provided this information to the surface owner(s) or	Cathodic Protection Borehole Intent), you must supply the surface owners and s, tank batteries, pipelines, and electrical lines. The locations shown on the plat ared on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Itice Act (House Bill 2032), I have provided the following to the surface libe located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
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Surface Owners

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45055006090000	Losse Name: FREDERICK	Lease Name: FREDERICK A STONE		Well # <u>1</u>	
API#: <u>15055006980000</u>	Lease Name: Transmission				
Owner Name: STONE, ELNOR	RA A				
Address: 12575 S STONE	E RD				
City: GARDEN CITY	State: KS	Zip: 67846-8984			
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:			