## 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	tted with this form.				
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 8/15/2014				
Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 201451				
Gas Gathering System:	Lease Name: GOERTZ				
Saltwater Disposal Well - Permit No.:	SW.Sec28 _Twp26 _R37W E _X W				
Spot Location: feet from N / S Line	Legal Description of Lease:				
feet from L E / W Line	T026S - R037W: SEC 028 All				
Enhanced Recovery Project Permit No.:					
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.:	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					
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling 火山				
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				
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: ONEOK FIELD SERVICES				
	Date: 08/15/2014				
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Trizo ator				
(Montage Cartino)					
Acknowledgment of Transfer: The above request for transfer of injection					
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.:				
FORM NO					
Pate	Date:				
Date:	Authorized Signature				
DISTRICT EPR /2-11-14	PRODUCTION DEC 1 2 2014 DEC 12 2014				
Mail to: Past Operator New Operator	or District				

#### Side Two

#### Must Be Filed For All Wells

* Lease Name:	GOERTZ		* Location:28	3 26 37WSW	
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)
A1	15093005660000/	2310FSL	2970FEL	GAS	ACTIVE
			2970FEL		ACIIVE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
. ji .i- <u>ii .i-</u>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	ogsternoon of the out of the second of the s	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL			
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL			
<del></del> :		FSL/FNL	FEL/FWL	Example 17.	<u> </u>

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.

API#:15093005660000

#### 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 (Ca	athodic Protection Borehole Intent)		
OPERATOR: License #	Well Location:		
Name: XTO ENERGY INC.			
Address 1: 210 PARK AVENUE, SUITE 2350	County: Kearny		
Address 2:	Lease Name: GOERTZ Well #:A1		
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below: T026S - R037W: SEC 028 All		
Contact Person: BRENDA WALLER			
Phone: ( 405 319-3259 Fax: ( )	10265 - R037W: SEC 028 All		
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:			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:	batteries, pipelines, and electrical lines. The locations shown on the plat		
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 T-1, or Form sing filed is a Form C-1 or Form CB-1, the plat(s) required by this		
KCC will be required to send this information to the surface owr task, I acknowledge that I am being charged a \$30.00 handling from the surface of the surface owr	er(s). To mitigate the additional cost of the KCC performing this		
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-1	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
I hereby certify that the statements made herein are true and correct to t	he best of my knowledge and belief.		
Date: Signature of Operator or Agent: Tim Welch	Title: Vice President-Land		
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KDOR #201451

### **Surface Owners**

API#: 15093	005660000	Lease Name: GOERTZ		Well # <u>A1</u>
Owner Name:	THOMPSON, KEITH	ETAL		
Address:	806 OLD FRM ESTA	TE APT B		
City:	HUTCHINSON	State: KS	Zip: 67502	
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:	