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### 081514\_Great\_American\_1-2.pdf

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	itted 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.:208269 V		
Gas Gathering System:	Lease Name: _ GREAT AMERICAN		
Saltwater Disposal Well - Permit No.:	00 20 274		
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T032S - R037W: SEC 028 NW4 SEC 029 NE4 SEC 030 E2		
Entire Project: Yes No			
Number of Injection Wells **	County: Stevens		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE		
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:			
(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section		
Type of Pit: Emergency Burn Settling	feet from E / W Line of Section		
lype of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KH		
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 Walsh		
	Signature:		
	선물 보다 보는 사람들이 발표되는 사람들이 발표되는 것같습니다. 그런 사람들이 되었다. 		
New Operator's License No33999 /	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 Titgwater		
	Signature: Orang Organics		
Acknowledgment of Transfer: The above request for transfer of injection a	urthorization out and the		
noted, approved and duly recorded in the records of the Kansas Corporation C			
Commission records only and does not convey any ownership interest in the a			
	A CONTRACT OF STATE 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.:		
- Topolition and the second party of the secon	pointing by No.		
Date:	Date:		
Authorized Signature	Authorized Signature 001		
DISTRICT EPR	RODUCTION DEC 1 2 2014 UIDEC 12 2014		
Mail to: Past Operator New Operator	District		

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#### Side Two

#### Must Be Filed For All Wells

Lease Name:	GREAT AMERICAN		Location: 3	0 32 37WSE	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fo	Section Line rom South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
12	15189202620000	1450FSL	1350FEL	GAS	ACTIVE
ilieli <u>markilari</u>					
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FÉL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL			
			FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	<u>a de la composition della com</u>	
		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#:15189202620000

#### 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)			
OPERATOR: License #32864 Name:XTO ENERGY INC.	Well Location:SESec30Twp,32S. R. 37East West			
Address 1: 210 PARK AVENUE, SUITE 2350	County: Stevens			
Address 2:	Lease Name: GREAT AMERICAN Well #:12			
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Contact Person: BRENDA WALLER	T032S - R037W: SEC 028 NW4 SEC 029 NE4 SEC 030 E2			
Phone: ( 405 319-3259				
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:				
the KCC with a plat showing the predicted locations of lease roads, tan	odic Protection Borehole Intent), you must supply the surface owners and lk batteries, pipelines, and electrical lines. The locations shown on the plat 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	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.			
I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this gree, 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 -1 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 Wold	Title: Vice President-Land			

**KDOR #208269** 

#### **Surface Owners**

API#: 15189202620000		Lease Name: <b>GREAT AME</b>	Well # <u>12</u>	
Owner Name	DAVIS, STEVEN R & (	CLENDA I		
		SLENDA L		
Address:	971 ROAD P			
City:	HUGOTON	State: KS	Zip: 67951-5200	
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:	