081514\_HO\_Stock\_1.pdf

RECEIVED AUG 20 2014 KCC WICHITA

### 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: Effective Date of Transfer: Oil Lease: No. of Oil Wells \_ 203449 Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: Gas Gathering System: \_\_\_ Lease Name: HOSTOCK Saltwater Disposal Well - Permit No.: \_ 26 SE Sec. EXW \_\_\_ feet from N/ S Line Legal Description of Lease: \_\_feet from DE / DW Line T025S - R034W: SEC 025 All Enhanced Recovery Project Permit No.: \_ Entire Project: Yes No County: Finney Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): CHASE \*\* Side Two Must Be Completed. Injection Zone(s):\_ feet from N / S Line of Section Surface Pit Permit No.: \_ (API No. If Drill Pit, WO or Haul) W Line of Section Drilling Haul-Off Workover KH Settling Type of Pit: Emergency Burn **BRENDA WALLER** Past Operator's License No. 32864 < Contact Person: Phone: 405-319-3259 Past Operator's Name & Address: XTO ENERGY INC. 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102 08/15/2014 Date: \_\_\_ Tim Welch Vice President-Land Signature: . **NANCY FITZWATER** New Operator's License No. 33999 / Contact Person: \_\_ New Operator's Name & Address: LINN OPERATING, INC. 281-840-4000 Phone: Oil / Gas Purchaser: WGP-KHC LLC 600 Travis Street, Suite 5100 Houston, TX 77002 08/15/2014 Title: REGULATORY COMPLIANCE SUPERVISOR Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #\_\_ 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 of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by permitted by No.: \_\_\_ Permit No.: \_\_\_\_\_\_ . Recommended action: \_\_\_\_ Date: Authorized Signature Authorized Signature PRODUCTION DEC 2 2 2014 DISTRICT \_\_\_\_\_ Mail to: Past Operator \_\_\_\_ New Operator\_

### RECEIVED AUG 20 2014 KCC WICHITA

#### Cido Tivo

#### Must Be Filed For All Wells

KDOR Lease	H O STOCK		21	5 26 34WSE	
Lease Name:	HOSIOCK		* Location:		
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)
1	15055008680000 /	2310FSL	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		
		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		

#### 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.

RECEIVED AUG 20 2014 KCC WICHITA

### 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.

20024				
OPERATOR: License # 32864	Well Location:			
Name: XTO ENERGY INC.				
Address 1: 210 PARK AVENUE, SUITE 2350	County: Finney			
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 of the lease below:			
Contact Person: BRENDA WALLER	T025S - R034W: SEC 025 All			
Phone: ( 405 319-3259 Fax: ( )	_			
Email Address: BRENDA_WALLER@XTOENERGY.COM	_			
Surface Owner Information:				
Name: See Attached				
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 county, and in the real estate property tax records of the county treasurer.			
Address 2:				
City: State: Zip:+  If this form is being submitted with a Form C-1 (Intent) or CB-1 (Catthe KCC with a plat showing the predicted locations of lease made)	athodic 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 (Ca the KCC with a plat showing the predicted locations of lease roads,				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered Select one of the following:  X   Certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will the subject well in the subject well in the subject well is or will the subject well in th	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  The locations shown on the plated on the Form C-1 plat, or a separate plat may be submitted.  The located is a copy of the Form C-1, Form CB-1, Form T-1, or Form rm 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 (Cathe KCC with a plat showing the predicted locations of lease roads, 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, father than the provided this information to the surface owner(s).  KCC will be required to send this information to the surface.	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  The locations shown on the plated on the Form C-1 plat, or a separate plat may be submitted.  The located is a copy of the Form C-1, Form CB-1, Form T-1, or Form rm 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 (Cathe KCC with a plat showing the predicted locations of lease roads, 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 filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, father I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hands.	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  The Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ex, and email address.  I acknowledge that, because I have not provided this information, the electrical work of the KCC performing this alling fee, payable to the KCC, which is enclosed with this form.			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, 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 filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, father I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand.	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  The Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ix, and email address.  I acknowledge that, because I have not provided this information, the electric owner(s). To mitigate the additional cost of the KCC performing this alling fee, payable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1 CP-1 will be returned.			

### **Surface Owners**

RECEIVED AUG 20 2014 KCC WICHITA

API#: 15055008680000		Lease Name: H O STOCK		Well # <u>1</u>
Owner Name:	NEUFELD, JACOB			
Address:	10165 W RIVER RD			
City:	HOLCOMB	State: KS	Zip: 67851-9087	
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:	