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: 8/15/2014 Effective Date of Transfer: Oil Lease: No. of Oil Wells _ 202873 L KS Dept of Revenue Lease No.: _ Gas Lease: No. of Gas Wells ___ Lease Name: _MILES Gas Gathering System:___ 14 _Twp. _ 23 _{A. _} Saltwater Disposal Well - Permit No.: ____ 0 0 S2 Sec. ______teet from \[\bar{N} / \[\bar{D} \bar{S} \] Line Legal Description of Lease: __feet from [] E / [] W Line T23S-R38W: SEC 14 ALL Enhanced Recovery Project Permit No.: ___ Entire Project: Yes No County: KEARNY Number of Injection Wells ____ Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s):___ Injection Zone(s):_ ** Side Two Must Be Completed. feet from N/ S Line of Section Surface Pit Permit No.: __ (API No. if Drill Pit, WO or Haul) feet from E / W Line of Section Drilling КY ☐ Workover Haul-Off Settling Burn Emergency Type of Pit: **BRENDA WALLER** Past Operator's License No. 32864 / Contact Person: _ Phone: 405-319-3259 Past Operator's Name & Address: XTO ENERGY INC. 08/15/2014 210 PARK AVENUE, SUITE 2350, OKLAHOMA CITY, OK 73102 Tim Welch Signature: Vice President-Land Title: NANCY FITZWATER Contact Person: _ New Operator's Name & Address: LINN OPERATING, INC. 281-840-4000 Phone: Oil / Gas Purchaser:_ 600 Travis Street, Suite 5100 Houston, TX 77002 08/15/2014 Nancy Fitzwater Signature: _ Title: REGULATORY COMPLIANCE SUPERVISOR has been 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.: ___ _____ . Recommended action: _ Authorized Signature Date: Authorized Signature DEC 1 7 2014 PRODUCTION _ DISTRICT ___ District New Operator. Mail to: Past Operator_

RECEIVED **AUG 20 2014** KCC WICHITA

Side Two

Must Be Filed For All Wells

KDOR Lease	MILES	* Location: 14 23 38WS2				
Lease Name: . 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)	
3-14	15093001930000 /	1320FSL	2640FWL	GAS	PR	
		FSUFNL	FEUFVVL			
AND DESCRIPTION OF THE PROPERTY OF THE PROPERT		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWI			
		FSL/FNL	FEL/FWI			
		FSL/FNL	FEL/FWI			
		FSL/FNI	FEL/FW	L		
		FSL/FNI	LFEL/FW			
		FSL/FN	L FEL/FW			
		FSL/FN	LFEL/FW	<u> </u>		
		FSL/FN	ILFEL/FW	/L		
		FSL/FN	IL FEL/FV	/L		
		FSL/FN	ILFEL/FV	VL		
		FSL/FN	NLFEL/FV	VL		
		FSL/F1	NLFEL/FV	NL		
	_			NL		
			NLFEL/F\	WL		
				WL		
				WL		
				WL		
				WL		
		FSL/F	INLFEUF	175		

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.

RECEIVED AUG 20 2014 **KCC WICHITA**

API#:15093001930000

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.

PPERATOR: License #	Well Location:				
lame: XTO ENERGY INC.		c. <u>14 Twp</u> . <u>23</u> S. R. <u>38</u> East West			
210 PARK AVENUE, SUITE 2350					
ddress 1:ddress 2:	Lease Name:	Well #:3-14			
city: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for mo	ultiple wells on a lease, enter the legal description of			
Contact Person: BRENDA WALLER	the lease below: T23S-R38W: SEC 14 AL	the lease below: T23S-R38W: SEC 14 ALL			
Fax: ()					
Email Address: BRENDA_WALLER@XTOENERGY.COM					
HIBH AGAICSS.					
Surface Owner Information:		anash an addition?			
Name: See Attached		When filing a Form T-1 involving multiple surface owners, attach an additional 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 1:	owner information can b				
Address 2:	County and in the real of	county, and in the real estate property tax records of the FFFF			
If this form is being submitted with a Form C-1 (Intent) or CB-1	(Cathodic Protection Borehole In	ntent), you must supply the surface owners and electrical lines. The locations shown on the pla n CB-1 plat, or a separate plat may be submitted			
If this form is being submitted with a Form C-1 (Intent) or CB-1 the KCC with a plat showing the predicted locations of lease roa are preliminary non-binding estimates. The locations may be en Select one of the following: X	(Cathodic Protection Borehole Index, tank batteries, pipelines, and stered on the Form C-1 plat, Form Notice Act (House Bill 2032), 1 hwill be located: 1) a copy of the large form being filed is a Form C-1 er, fax, and email address.	n CB-1 plat, or a separate plat may be submitted. Bave provided the following to the surface Form C-1, Form CB-1, Form T-1, or Form Form CB-1, the plat(s) required by this			
If this form is being submitted with a Form C-1 (Intent) or CB-1 the KCC with a plat showing the predicted locations of lease roa are preliminary non-binding estimates. The locations may be ensured to select one of the following: X I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or 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 KCC will be required to send this information to the surface ask, I acknowledge that I am being charged a \$30.00 to	(Cathodic Protection Borehole Inds, tank batteries, pipelines, and stered on the Form C-1 plat, Form Notice Act (House Bill 2032), I havill be located: 1) a copy of the late form being filed is a Form C-1 er, fax, and email address. Per(s), I acknowledge that, because inface owner(s). To mitigate the abandling fee, payable to the KCC	n CB-1 plat, or a separate plat may be submitted have provided the following to the surface Form C-1, Form CB-1, Form T-1, or Form or Form CB-1, the plat(s) required by this see! have not provided this information, the additional cost of the KCC performing this by which is enclosed with this form.			
If this form is being submitted with a Form C-1 (Intent) or CB-1 the KCC with a plat showing the predicted locations of lease roa are preliminary non-binding estimates. The locations may be en Select one of the following: X Certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number	(Cathodic Protection Borehole Inds, tank batteries, pipelines, and attered on the Form C-1 plat, Form Notice Act (House Bill 2032), 1 h will be located: 1) a copy of the left form being filed is a Form C-1 er, fax, and email address. er(s). Lacknowledge that, because trace owner(s). To mitigate the schandling fee, payable to the KCC thandling fee with this form. If the	n CB-1 plat, or a separate plat may be submitted have provided the following to the surface Form C-1, Form CB-1, Form T-1, or Form or Form CB-1, the plat(s) required by this see! have not provided this information, the additional cost of the KCC performing this by which is enclosed with this form.			
If this form is being submitted with a Form C-1 (Intent) or CB-1 the KCC with a plat showing the predicted locations of lease roa are preliminary non-binding estimates. The locations may be en Select one of the following: X Certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or 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 KCC will be required to send this information to the surface of the sak, I acknowledge that I am being charged a \$30.00 in the surface owner and the same of th	(Cathodic Protection Borehole Index, tank batteries, pipelines, and stered on the Form C-1 plat, Form Notice Act (House Bill 2032), I havill be located: 1) a copy of the late form being filed is a Form C-1 er, fax, and email address. Per(s). I acknowledge that, because inface owner(s). To mitigate the action of the KCC thandling fee, payable to the KCC thandling fee with this form. If the form CP-1 will be returned.	n CB-1 plat, or a separate plat may be submitted. Have provided the following to the surface Form C-1, Form CB-1, Form T-1, or Form or Form CB-1, the plat(s) required by this see I have not provided this information, the additional cost of the KCC performing this by which is enclosed with this form. The fee is not received with this form, the KSONA-			

Surface Owners

API#: 15093001930000	Lease Name: MILES		Well # <u>3-14</u>
Arim			
Owner Name: MCKENZIE, RON	ALD & EVELYN REVOCABLE TR	RUST (W2)	
Address: 1755 S VIVIAN Co	OURT		
City: LAKEWOOD	State: CO	Zip: 80228	
Owner Name:			
Address:			
City:	State:	Zip:	
Owner Name:			
Address:			
	State:	Zip:	
City:	-		
Owner Name:			
Address:			
City:	State:	Zip:	
Owner Name:			
Address:			
City:	State:	Zip:	
Owner Name:			
Address:			
City:	State:	Zip:	