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.

Check Applicable Boxes: MUST be submitted.	ted 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.: 203631			
Gas Gathering System:	Lease Name: SHELL			
Saltwater Disposal Well - Permit No.:	0 NE NE SW Sec. 26 Twp. 24 H. 37W EX			
Spot Location: feet from N / S Line	Į.			
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T24S-R37W: SEC 26 ALL			
Entire Project: Yes No				
Number of Injection Wells **	County: KEARNY			
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE  Injection Zone(s):			
** Side Two Must Be Completed.				
	11,00007 207 9(0)			
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	□ Haul-Off □ Workover □ Drilling よん			
	BRENDA WALLER			
Past Operator's License No. 32864 /	Contact Person:			
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			
The Operator a Best of the	281.840.4000			
New Operator's Name & Address: LINN OPERATING, INC.	Fisure.			
600 Travis Street, Suite 5100 Houston, TX 77002	Oil / Gas Purchaser:			
	Date: 08/15/2014			
Title: _ REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Trigoater			
Due.				
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				
Commission records only and deep vorterms, any				
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			
	permitted by No.:			
Permit No.;, Recommended action;	permitted by No			
	Date:			
Date:	Date:			
DISTRICT EPR	PRODUCTION DEC 1 9 2014 DEC 1 9 2014			
DISTRICT	ator District			

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	e No.: 203631					
Lease Name: SHELL			* Location: 26 24 37WSW			
Well No. API No. (YR DRLD/PRE '67)			Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)	
1-26 (NPI)	15093006640000 /	2440FSL	2500FWL	GAS	PR	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
			FEL/FWL			
			FEUFWL			
			FEL/FWL		***	
			FEL/FWL			
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		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.

API#:15093006640000

### 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 (C	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License # 32864 Name: XTO ENERGY INC.	Well Location:  O NE NE SW Sec. 26 Twp. 24 S. R. 37 East West			
Address 1: 210 PARK AVENUE, SUITE 2350	County:KEARNY			
Address 2:	Lease Name: SHELL Well #:1-26 (NPI)			
City: OKLAHOMA CITY State: OK Zip: 73102 +	It filing a Form T-1 for multiple wells on a lease, enter the legal description			
Contact Person: BRENDA WALLER	the lease below: T24S-R37W: SEC 26 ALL			
Phone: ( 405 319-3259 Fax: ( )	1210 10111. 323 201122			
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, tank are preliminary non-binding estimates. The locations may be entered or Select one of the following:  X I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be locations.	dic Protection Borehole Intent), you must supply the surface owners and chatteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  act (House Bill 2032), I have provided the following to the surface ocated: 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			
form; and 3) my operator name, address, phone number, fax, at	nd email address.			
	cknowledge that, because I have not provided this information, the /ner(s). To mitigate the additional cost of the KCC performing this fee, 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 Welch	Title: Vice President-Land			
Signature of Operator of Agent.	The.			

KDOR #203631

### **Surface Owners**

API#: <u>15093(</u>	006640000	Lease Name: SHELL		Well # <u>1-26 (NPI)</u>
Owner Name:	WANKLYN, SANDRA	A K AND MARK M		
Address:	PO BOX 594			
City:	LAKIN	State: KS	Zip: 67860	
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:	