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: MUST be submitte						
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.: 208490					
Gas Gathering System:	Lease Name: TATE					
Saltwater Disposal Well - Permit No.:						
Spot Location: feet from N / S Line						
feet from E / W Line	Legal Description of Lease:					
Enhanced Recovery Project Permit No.:	T026S - R037W: SEC 023 All					
<u> </u>						
Entire Project: Yes No	Marroy.					
Number of Injection Wells***	County: Kearny					
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE					
** 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)						
Type of Pit: Emergency Burn Settling	J.100 O.					
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					
	Tim Welch					
Title:Vice President-Land	Signature:					
	NANCY FITTIMATED					
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					
	Signature:					
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature:					
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #has been					
Acknowledgment of Iransfer: The above request for transfer of injection	Commission. This acknowledgment of transfer pertains to Kansas Corporation					
noted, approved and duly recorded in the records of the Kansas Corporation	There in in a time work of a resit parmit					
Commission records only and does not convey any ownership interest in the	above injection well(s) of 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.:					
Date:	Date: Authorized Signature					
Authorized Signature						
Now Oncore	District					
Mail to: Past Operator New Opera						

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#### Side Two

#### Must Be Filed For All Wells

KDOR Lease No.:		* Leasting. 23 26 37WSW			
Lease Name: TATE		* Location: 23 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)
12	15093200890000	1320FSL	3960FEL	GAS	ACTIVE
			***************************************		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSUFNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		***************************************
		FSL/FNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNI			
				Mary Control of the C	
		FSL/FN	L		

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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#### 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.

OPERATOR: License # 32864	Well Location:	
Name: XTO ENERGY INC.	0144	S. R. 37 East West
Address 1: 210 PARK AVENUE, SUITE 2350	County-Kearny	
Address 2:	TATE	Well #:12
Dity: OKLAHOMA CITY State: OK Zip: 73102 +		a lease, enter the l <mark>egal de</mark> scription of
Contact Person: BRENDA WALLER	the lease below: T026S - R037W: SEC 023 All	
Phone: ( 405 319-3259 Fax: ( )		
Email Address: BRENDA_WALLER@XTOENERGY.COM		
Surface Owner Information:		
Name: See Attached	When filing a Form T-1 involving multip sheet listing all of the information to th	le surface owners, attach an additionale left for each surface owner. Surface
Address 1:	owner information can be found in the	records of the register of deeds for the
Address 2:	county, and in the real estate property t	tax records or the county treasurer.
State: Zip:+  If this form is being submitted with a Form C-1 (Intent) or CB-1	(Cathodic Protection Borehole Intent), you middle tank hatteries, pipelines, and electrical line	is. The locations shown on the plac
State: Zip:+  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 road are preliminary non-binding estimates. The locations may be ent	(Cathodic Protection Borehole Intent), you middle tank hatteries, pipelines, and electrical line	is. The locations shown on the plac
State: Zip:+  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 road are preliminary non-binding estimates. The locations may be ent	(Cathodic Protection Borehole Intent), you meds, tank batteries, pipelines, and electrical line tered on the Form C-1 plat, Form CB-1 plat, or lotice Act (House Bill 2032), I have provided will be located: 1) a copy of the Form C-1, Fore form being filed is a Form C-1 or Form CB-	the following to the surface rm CB-1, Form T-1, or Form
State: Zip:+  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 road are preliminary non-binding estimates. The locations may be entitled to 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 wood CP-1 that Lam filing in connection with this form; 2) if the	(Cathodic Protection Borehole Intent), you meds, tank batteries, pipelines, and electrical line tered on the Form C-1 plat, Form CB-1 plat, or lotice Act (House Bill 2032), I have provided will be located: 1) a copy of the Form C-1, Form form being filed is a Form C-1 or Form CB-1, fax, and email address.  r(s). I acknowledge that, because I have not proceed the control of the c	the following to the surface rm CB-1, Form T-1, or Form T, the plat(s) required by this provided this information, the tof the KCC performing 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 road are preliminary non-binding estimates. The locations may be entitled to 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 we CP-1 that I am filling 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 with the required to send this information to the surface owner.	(Cathodic Protection Borehole Intent), you may do, tank batteries, pipelines, and electrical line tered on the Form C-1 plat, Form CB-1 plat, or lotice Act (House Bill 2032), I have provided will be located: 1) a copy of the Form C-1, For e form being filed is a Form C-1 or Form CB-1, fax, and email address.  r(s). I acknowledge that, because I have not place owner(s). To mitigate the additional cost landling fee, payable to the KCC, which is encountered.	the following to the surface rm CB-1, Form T-1, or Form 1, the plat(s) required by this provided this information, the t of the KCC performing this closed 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 road are preliminary non-binding estimates. The locations may be entitled to 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 with 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 surface owner than the second option, submit payment of the \$30.00 has the second option, submit payment of the \$30.00 has the second option.	(Cathodic Protection Borehole Intent), you meds, tank batteries, pipelines, and electrical line tered on the Form C-1 plat, Form CB-1 plat, or lotice Act (House Bill 2032), I have provided will be located: 1) a copy of the Form C-1, Form of the form being filed is a Form C-1 or Form CB-1, fax, and email address.  In a cknowledge that, because I have not preface owner(s). To mitigate the additional cost and ling fee, payable to the KCC, which is enough of the component of the fee is not recomm CP-1 will be returned.	the following to the surface rm CB-1, Form T-1, or Form 1, the plat(s) required by this provided this information, the t of the KCC performing this closed with this form.

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

## **Surface Owners**

API#: 15093200890	000 Lease Name: TATE		Well # <u>12</u>
Ді ін			
Owner Name: TATE,	, GEORGE H & JUDY B		
Address: PO BO	OX 69		
City: LAKIN	N 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:	