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## 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 submitted.	1
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.: 221690
Gas Gathering System:	Lease Name: _TATESCHEUERMAN
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.:	T025S - R035W: SEC 024 AII
Entire Project: Yes No	
Number of Injection Wells **	County: Kearny
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Dis Doumis Mo.	fact from N. ( C. Line of Section
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
Thun Cattling C	feet fromE /W Line of Section
Type of Pit: Emergency Burn Settling	Hauf-Off Workover Drilling
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 Welch
Title:	Signature:
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: _ WGP-KHC LLC
	00/45/0044
	VIIV
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Tigwater
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit #has been
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	
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.:
Permit No.: Heconinended denon	perimited by No.:
Date	Poto.
Date:	Date:
DISTRICT EPR /2-/5-/4 P	PRODUCTION DEC 1 6 2014 DEC 1 6 2014
Mail to: Past Operator New Operator	

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#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	No.: 221690						
* Lease Name:	TATESCHEUERMAN	Annual and a second and a second as a seco	* Location: 24 25 35WNE				
Well No.	API No. (YR DRLD/PRE *67)	Footage from (i.e. FSL = Feet fo		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)		
2	15093215530000/	595FNL	2580FEL	GAS	ACTIVE		
			***************************************				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
			FEL/FWL				
		FSUFNL	FEL/FWL				
			FEL/FWL				
		FSL/FNL	FEL/FWL				
			FEL/FWL				
			FEL/FWL				
			FEL/FWL		4		
	Market	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
	AND THE PROPERTY OF THE PROPER	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		****		
	<u> </u>	FSL/FNL	FEL/FWL				
	***************************************	FSL/FNL	FEL/FWL				
	AND THE RESERVE OF THE PARTY OF	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#:15093215530000

### 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.	athodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License # 32864 Name: XTO ENERGY INC.	Well Location:			
240 DADY AVENUE CUITE 2250	County: Kearny			
	Lease Name: TATESCHEUERMAN Well #:2			
Address 2:				
Contact Person: BRENDA WALLER	It filing a Form T-1 for multiple wells on a lease, enter the legal descript the lease below:			
Phone: ( 405 319-3259 Fax: ( )	T025S - R035W: SEC 024 All			
Email Address: BRENDA_WALLER@XTOENERGY.COM				
Elital Address.				
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: State: Zip:+				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:  X   Certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be location; and 3) my operator name, address, phone number, fax, and	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  It (House Bill 2032), I have provided the following to the surface cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this			
I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling f	knowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this iee, 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-1				
I hereby certify that the statements made herein are true and correct to t	he best of my knowledge and belief.			
Date: 8/15/2014 Signature of Operator or Agent: Tim Welch	Title: Vice President-Land			

KDOR #221690

### **Surface Owners**

API#: 150932	215530000	Lease Name:	TATESCHEUERI	MAN		Well # <u>2</u>
Owner Name:	WHEATLAND ELECT	RIC COOPERAT	TIVE INC			
Address:	PO BOX 1078					
City:	GARDEN CITY	State	: KS	Zip:	67846	
Owner Name:						
Address:						
City:		State	:	Zip:		
Owner Name:						
Address:						
City:		State	:	Zip:		
Owner Name:						
Address:						
City:		State	<b>::</b>	Zip:		
Owner Name:						
Address:						
City:		State	e:	Zip:		
Owner Name:						
Address:						
City:		State	<b>:</b> :	Zip:		