### 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:	04510044
Oil Lease: No. of Oil Wells***	Effective Date of Transfer: 8/15/2014
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 204039
Gas Gathering System:	Lease Name: _USA WHITE
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 023 All
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 Pit Permit No.: (API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section  feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KA
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	Signature: Tim Welch
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
	Vuic.
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Titzwater
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. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the a	above injection well(s) or 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 pi
Permit No.: Recommended action:	permitted by No.:
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR /2/6-/4 F	PRODUCTION DEC 1 7 2014 UID DEC 1 7 2014
Mail to: Past Operator New Operato	or District

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	No.: 204039				
* Lease Name:	U S A WHITE		* Location: 23	3 25 35WSE	
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)
A1	15093002850000 /	2310FSL	2310FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		4
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL			
		504 F14			
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSUFNL	FEL/FWL		
				Management of the second of th	
		FSL/FNL	FEL/FWL		40,44,44,44,44,44,44,44,44,44,44,44,44,4
			***************************************		
	·	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.

#### 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	thodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 32864  Name: XTO ENERGY INC.  Address 1: 210 PARK AVENUE, SUITE 2350  Address 2: City: OKLAHOMA CITY State: OK Zip: 73102 + Contact Person: BRENDA WALLER  Phone: ( 405 319-3259 Fax: ( ) Email Address: BRENDA_WALLER@XTOENERGY.COM	Well Location: SESec. 23 _Twp.25 _S. R. 35East West  County:Kearny  Lease Name: U S A WHITEWell #:A1  It filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:  T025S - R035W: SEC 023 All
Surface Owner Information:           Name:         See Attached           Address 1:	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.
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	catteries, 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 lated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ling 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 to	knowledge that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this ee, 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	e with this form. If the fee is not received with this form, the KSONA-1 will be returned.
I hereby certify that the statements made herein are true and correct to the	
Date: Signature of Operator or Agent: Tim Welch	Title:

KDOR #204039

API#:15093002850000

### **Surface Owners**

API#: 150930	002850000	Lease Name: USA WHITE		Well # <u>A1</u>	
Owner Name:	UNRUH, DAVE R TR	UST			
Address:	PO BOX 458				
City:	MONTEZUMA	State: KS	Zip: 67867		
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:		