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.			
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.: 204286		
Gas Gathering System:	Lease Name: WAGNER		
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.:	T033S - R038W: SEC 016 S2 SEC 017 E2		
Entire Project: Yes No			
Number of Injection Wells**	County: Stevens		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE		
** Side Two Must Be Completed.			
The state of the first of the state of the s	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	teet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling K4		
7,			
Past Operator's License No	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: Vice President-Land	Signature:		
New Operator's License No33999 /	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		
000 Havis Street, Same 9100 Houston,	00/45/0044		
	Date: 08/15/2014		
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature: Nancy Trizvator		
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been		
	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the			
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:		
	PRODUCTION DEC 1 1 2014 DEC 1 1 2014		
Mail to: Past Operator New Operator	DE0 7 = 1		

Side Two

Must Be Filed For All Wells

* Lease Name:	WAGNER		* Location: 17 33 38WSE			
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)	
1	15189004580000 🗸	660FSL	1320FEL	GAS	ACTIVE	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	MUMININI MINIMANA	FSL/FNL	FEL/FWL			
		FSUFNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
***************************************			FEL/FWL			
		FSL/FNL	FEL/FWL	WARRY PARTY OF THE		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	0.1111	FSL/FNL	FEL/FWL		4	
	A	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			

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.

API#:15189004580000

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.

32864	
OPERATOR: License # 32864 Name: XTO ENERGY INC.	Well Location:
Name: ATO ENERGY INC. Address 1: 210 PARK AVENUE, SUITE 2350	County:Stevens
Address 2:	
Address 2:City: OKLAHOMA CITY State: OK Zip: 73102 +	
City: OKEANOMIA STITY State: OK ZIP: 73102 + Contact Person: BRENDA WALLER	•
	T033S - R038W: SEC 016 S2 SEC 017 E2
Phone: (
Email Address: BRENDA_WALLENGATOLINET.30M	
Surface Owner Information:	
Name: See Attached	
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:	
City: State: Zip:+ If this form is being submitted with a Form C-1 (Intent) or CB-1 (C. the ICC) with a plat abouting the predicted legitime of legge reads.	athodic Protection Borehole Intent), you must supply the surface owners and
If this form is being submitted with a Form C-1 (Intent) or CB-1 (C the KCC with a plat showing the predicted locations of lease roads,	·—
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cthe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be enter Select one of the following: X Certify that, pursuant to the Kansas Surface Owner Notion owner(s) of the land upon which the subject well is or will CP-1 that I am filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form I have not provided this information to the surface owner(s) KCC will be required to send this information to the surface.	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. ice Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this
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Surface Owners

API#: <u>151890</u>	004580000	Lease Name: WAGNER		weii # <u>1</u>				
Owner Name:	wner Name: ORDONEZ, PEDRO & MARIA							
Address:	548 ROAD N							
City:	HUGOTON	State: KS	Zip: 67951-5252					
Owner Name:								
Address:								
City:		State:	Zip:					
Owner Name:								
Address:								
City:		State:	Zip:					
Owner Name:								
Address: City:		State:	Zip:					
City.		State.	Lip.					
Owner Name:								
Address:								
City:		State:	Zip:					
Owner Name:								
Address:								
Citv:		State:	Zip:					