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KANSAS CORPORATION COMMISSION 081514_Brown_19.pdf OIL & GAS CONSERVATION DIVISION

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:	ttea 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.: 200393		
Gas Gathering System:	Lease Name:BROWN		
Saltwater Disposal Well - Permit No.:	SW SW SW NE Sec. 31 Twp. 25 R. 34W FEXW		
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: T025S - R034W: SEC 031, SW SW SW NE		
Enhanced Recovery Project Permit No.:	10255 - RU34WY: SEC 031/3VV 3VV 3VV 1VL		
Entire Project: Yes No			
Number of Injection Wells***	County: Finney		
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		
(API No. If Drill Pit, WO or Haul)	feet from E / W Line of Section		
Type of Pit: Emergency Bum Settling	Haul-Off Workover Drilling 人み		
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 KCC WICH!TA		
Title: Vice President-Land	Signature: Tim Welch MAR 1 1 2015		
Title:	DEOC!!		
	NAMES STANFOR		
New Operator's License No	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		
	040 27		
Title: REGULATORY COMPLIANCE SUPERVISOR	Signature:		
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 pit		
Permit No.: Recommended action:	permitted by No.:		
Date:	Date:		
	Authorized Signature		
	PRODUCTION 3.13.15 UIC 343-15		
Mail to: Past Operator New Operator	or District		

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Side Two

Must Be Filed For All Wells

Lease Name	BROWN		Location:	31 25S 34W SW SW	SW NE
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
19	15055006210000 √	2840 FSL 2	440 FEL	GAS	ACTIVE
			FEL/FWL		
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		FSL/FNL	FEL/FWL		Add According to the Control of the
		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		
	-	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.

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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.

Select the corresponding form being filed: C-1 (Intent) CB-1	(Cathodic Protection Borehole Intent)				
OPERATOR: License # 32864	Well Location:				
Name: XTO ENERGY INC.	SW SW SW NE Sec. 31 Twp. 25 S. R. 34 East West				
Address 1: 210 PARK AVENUE, SUITE 2350	County: Finney				
Address 2:	Lease Name: BROWN Well #:19				
City: OKLAHOMA CITY State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description				
Contact Person: BRENDA WALLER	the lease below: T025S - R034W: SEC 031 SW SW SW NE				
Phone: (405 319-3259 Fax: ()	10255 - 705444. 520 051/344 544 544				
Email Address: BRENDA_WALLER@XTOENERGY.COM					
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 regiment days for county, and in the real estate property tax records of the county treasure.				
Address 2: State: Zip:+	· · · ·				
City: State: Zip					
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the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered	nodic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.				
Select one of the following:					
owner(c) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface located: 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 and email address.				
I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling.	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ng fee, payable to the KCC, which is enclosed with this form.				
If choosing the second option, submit payment of the \$30.00 handlin form and the associated Form C-1, Form CB-1, Form T-1, or Form Cl	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.				
I hereby certify that the statements made herein are true and correct					
Date: Signature of Operator or Agent: Walk	Title: Vice President-Land				
API # :15055006210000 KDOR #200393					

Surface Owners

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API#:150550	006210000	Lease Name: BROWN		Well # <u>19</u>
Owner Name:	GREATHOUSE, RAL	PH A IND OF TRUST		
Address:	4012 CAPITOL DR			
City:	FORT COLLINS	State: CO	Zip: 80526-2910	
Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:				KCC WICHITA
City:		State:	Zip:	MAR 1 1 2015
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Owner Name:				
Address:				
City:		State:	Zip:	
Owner Name:				
Address:		State:	Zip:	
City:		state.	21 p .	
Owner Name:				
Address:				
City:		State:	Zip:	