KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 1-1 April 2004 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

Check Applicable Boxes:				
✓ Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 02/01/2010			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 106449			
Gas Gathering System:	Lease Name: HOSTETTLER			
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.:	SE SECTION 19			
Entire Project: Yes No	County: Kingman			
Number of Injection Wells**	Production Zone(s): MISSISSIPPI CHAT			
Field Name: Spivey-Grabs-Basil				
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.:	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 Burn Settling	Haul-Off			
Past Operator's License No. 32446	Contact Person: LYNNE MOON			
Past Operator's Name & Address: MERIT ENERGY COMPANY	Phone: 972-701-8377			
13727 NOEL ROAD, SUITE 500 DALLAS, TX. 75240	Date: 2/1/10			
Title: REGULATORY MANAGER	Signature Moon			
New Operator's License No. 33999	Contact Person: Mark Owens			
116W Operator a License 110.				
New Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4000 RECEIVED			
600 TRAVIS STE. 5100	Oil / Gas Purchaser: APR 0.7 2010			
HOUSTON, TEXAS 77002	Date: 2/1/10 APR U / ZUIL			
Title: Vice President, Operations	Signature: Markedure KCC WICHIT			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #has been			
noted, approved and duly recorded in the records of the Kansas Corpor	ration Commission. This acknowledgment of transfer pertains to Kansas			
Corporation Commission records only and does not convey any ownership				
is acknowleged as the	is acknowleged as the			
new operator and may continue to inject fluids as authorized by	new operator of the above named lease containing the surface pit			
Permit No.: Recommended action:	permitted by No.:			
Date:	Date:			
Authorized Signature	Authorized Signature			
DISTRICT EPR	PRODUCTION 7/15/10 UIC 1-13/10			
Mail to: Past Operator New Operator	District			

Side Two

Must Be Filed For All Wells

KDOR Lease No.:					
* Lease Name	HOSTETTLER	***	Location: K	INGMAN COUNTY /	9-305-8W
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	Hostettler, 15-095-19058	990 Circle FSUFNL	990 Circle FEL/FWL	Oil	<u>TA</u>
		F\$L/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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		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.