

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form T-1
April 2004
Form must be Typed
Form must be Signed
All blanks must be Filled

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 2 **
- ☒ Gas Lease: No. of Gas Wells 1 **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: SPIVEY-GRABS-BASIL

**** Side Two Must Be Completed.**

Effective Date of Transfer: 02/01/2010

KS Dept of Revenue Lease No.: 211612 *MB*

Lease Name: HUFFORD

_____ SE Sec. 14 Twp. 30S R. 7 ☐ E ☒ W

Legal Description of Lease: _____
SE/4 SECTION 14

County: KINGMAN

Production Zone(s): MISSISSIPPI CHAT

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

Past Operator's License No. 32446

Contact Person: LYNNE MOON

Past Operator's Name & Address: MERIT ENERGY COMPANY
13727 NOEL ROAD, SUITE 500, DALLAS, TEXAS 75240

Phone: 972-701-8377

Date: 02/01/2010

Title: REGULATORY MANAGER

Signature: *Lynne Moon*

New Operator's License No. 33999

Contact Person: MARK OWEN

New Operator's Name & Address: LINN OPERATING, INC.
600 TRAVIS, STE 5100

Phone: 281-840-4000

Oil / Gas Purchaser: _____

Date: 02/01/2010

Title: _____

Signature: *Mark Owen*

RECEIVED

APR 07 2010

KCC WICHITA

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 Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

_____ is acknowledged as the
new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____
Date: _____

Authorized Signature

_____ is acknowledged as the
new operator of the above named lease containing the surface pit
permitted by No.: _____.
Date: _____

Authorized Signature

DISTRICT _____ EPR 6-28-10 PRODUCTION 6/28/10 UIC 6-28-10
Mail to: Past Operator _____ New Operator _____ District _____

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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Must Be Filed For All Wells

KDOR Lease No.: 211612* Lease Name: HUFFORD* Location: KINGMAN COUNTY 14-30S-7W

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)
4	HUFFORD, 15-095-21355 ✓	660	660	OIL	PROD
5	HUFFORD, 15-095-21389 ✓	660	1930	OIL	PROD
6	HUFFORD, 15-095-21390 ✓	2130	1980	GAS	PROD
		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		
		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		

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.