

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 1 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ 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

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

Effective Date of Transfer: 02/01/2010
KS Dept of Revenue Lease No.: 166328
Lease Name: JOHNSON 1 1 (HINKS)
_____ Sec. 17 Twp. 30S R. 7 ☐ E ☒ W
Legal Description of Lease: _____
SWSW SECTION 17
County: KINGMAN
Production Zone(s): MISSISSIPPI CHAT
Injection Zone(s): _____

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling OR

Past Operator's License No. 32446 ✓
Past Operator's Name & Address: MERIT ENERGY COMPANY
13727 NOEL RD., SUITE 500 DALLAS, TEXAS 75240
Title: REGULATORY MANAGER

Contact Person: LYNNE MOON
Phone: 972-701-8377
Date: 01/30/2010
Signature: Lynne Moon

New Operator's License No. 33999 ✓
New Operator's Name & Address: LINN OPERATING, INC.
600 TRAVIS, STE. 5100
HOUSTON, TEXAS 77002
Title: VICE PRESIDENT, OPERATIONS

Contact Person: MARK OWEN
Phone: 281-840-4000
Oil / Gas Purchaser: _____
Date: 01/30/2010
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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SCANNED

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 106328

* Lease Name: JOHNSON 1 1 (HINKS)

* Location: KINGMAN COUNTY 17-305-7W

[illegible]

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.