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:	1		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 02/01/2010		
✓ Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 204734		
Gas Gathering System:	Lease Name: SAVAGE GAS UNIT		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	Sec Wp. === R. = E W		
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	SEC. 11-T30S-R8W		
Entire Project: Yes No	County: KINGMAN		
Number of Injection Wells**	Production Zone(s): MISSISSIPPIAN		
Field Name: SPIVEY GRABS			
** 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 Workover Drilling		
Past Operator's License No. 32446	Contact Person: LYNNE MOON		
Past Operator's Name & Address: MERIT ENERGY COMPANY	Phone: 972-701-8377		
13727 NOEL RD., SUITE 500 DALLAS, TEXAS 75240	Date: 01/30/2010		
Title: REGULATORY MANAGER	Signature Offer Moon		
	· · · · · · · · · · · · · · · · · · ·		
New Operator's License No. 33999	Contact Person: MARK OWEN		
New Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4000		
600 TRAVIS, STE. 5100	Oil / Gas Purchaser:		
HOUSTON, TEXAS 77002	Date: 01/30/2010 APR 0 7 2010		
Title: VICE PRESIDENT, OPERATIONS	Signature: Mack live ico MICLITA		
	- KCC WICHIIA		
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	o interest in the above injection well(s) or pit permit.		
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 permitted by No.:		
Permit No.: Recommended action:	permitted by No.:		
	permitted by No.: FEB 1 6 2010 No.: Authorized Signature WICHITA		
Date:	Date: KCC M//OL		
Authorized Signature	Authorized Signaldre VICHITA		
	PRODUCTION //20/10 UIC / WOTO		
Mail to: Past Operator New Operator	District		



SCANNED

Side Two

Must Be Filed For All Wells

KDOR Lease No.:						
* Lease Name: SAVAGE GAS UNIT 1-11		* Location: SEC. 11-T30S-R8W				
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)	
1-11	15-095-00775 /	2310 Circle 330	Circle FEL	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			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	*	FSL/FNL	FEL/FWL			
			FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL				

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.