KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-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	i	KS Dept of Revenue Lease No.: 205/97		
Gas Gathering System:		• //		
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from	N/ S Line	Sec. 2.7_ Twp. 30S F. 2. EVW		
feet from	E / W Line Legal Description	of Lease:		
Enhanced Recovery Project Permit No.:	SW/4 SECTION	127		
Entire Project: Yes No	County: KINGMA	AN		
Number of Injection Wells	**			
Field Name: SPIVEY GRABS	Production Zone(s	S): MISSISSIPPI CHAT		
Side Two Must Be Complet	Injection Zone(s):			
Surface Pit Permit No.: (API No. if Drill Pit, W.) Type of Pit: Emergency Burn	VO or Haul) Settling Haul-Off			
Past Operator's License No. 32446✓	Contact Person:	LYNNE MOON		
Past Operator's Name & Address: MERIT ENERGY C				
13727 NOEL RD., SUITE 500 DALLAS, TEXAS 75240	Date: _01/30/2010			
Title: REGULATORY MANAGER		a Moon		
New Operator's License No. 33999	Contact Person: N	Mark Owen		
New Operator's Name & Address: LINN OPERATING	G, INC. Phone: 281-840-40	RECEIVED		
600 TRAVIS, STE. 5100	Oil / Gas Purchase	APR 0.7 2010		
HOUSTON, TEXAS 77002				
itle: Vice President, Operations	Date: 01/30/2010 Signature:	KCC WICHITA		
Acknowledgment of Transfer: The above request				
noted, approved and duly recorded in the records Corporation Commission records only and does not	of the Kansas Corporation Commission. The convey any ownership interest in the above it	nis acknowledgment of transfer pertains to Kansas injection well(s) or pit permit.		
is a	acknowleged as the	is acknowleged as the		
ew operator and may continue to inject fluids	as authorized by new operator of th	e above named lease containing the surface		
Permit No.: Recommended a		FEB 1 6 2010		
Pate:	Date:	KCC WICHIT		
Authorized Sign		Authorized Signature		
DISTRICT EPR 7/	nature PRODUCTION 7/16	Authorized Signature		



Side Two

Must Be Filed For All Wells

KDOR Lease No.:						
* Lease Name:	TJADEN "B"		* Location: KI	NGMAN COUNTY	27-305-8W	
Well No.	API No. Footage from Section (YR DRLD/PRE '67) (i.e. FSL = Feet from So		Section Line om South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
1 <u>J</u>	15-095- 00908- 0ETJADEN B,	1650F54 1.	990 Circle	GA S	PROD	
2 TJAI	3/8/1956	1650 FSIJFNL	330 FEUFWL	OIL	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			

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.