## 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 4	Effective Date of Transfer: 02/01/2010			
Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 10630			
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:	Lease Name: WEST SPIVEY UNIT			
Spot Location: feet from N / S Line	Sec. 24 Twp. 30S R. 8 EVW			
feet from E / W Line	Legal Description of Lease: SECTION 24			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County: KINGMAN			
Number of Injection Wells**				
Field Name: SPIVEY-GRABS	Production Zone(s):			
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	feet from N / S 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 Lype Moon			
New Operator's License No. 33999 ✓	Contact Person: MARK OWEN			
New Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4000 RECENTED			
600 TRAVIS, STE 5100	VECEIVED			
	Oil / Gas Purchaser: APR 0.7 2010			
HOUSTON, TEXAS 77002	Date: 01/30/2010			
Title: VICE PRESIDENT, OPERATIONS	Signature: Mark Clue KCC WICHITA			
Acknowledgment of Transfer: The above request for transfer of injection and noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership	ation Commission. This acknowledgment of transfer pertains to Kansas			
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			
Date:	Date:			
DISTRICT EPR 7/15/10	PRODUCTION 7/15/10 UIC 7-15-10			
Mail to: Past Operator New Operator	District			



## Side Two

## Must Be Filed For All Wells

KDOR Lease	No.: 106301				
* Lease Name	WEST SPIVEY UNIT		* Location:	24-305-8W	
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)
WSU #2	J TJADEN A.7, 15 005 01153	2904 Circle	3802 Circle	-OIL	P&A 3/10/2006
WSU #3	JOE TJADEN A 6,15-095-01152	1650 (FSL)FNL	3630 FEL/FWL	OIL	PROD
WSU #4	J TJADEN A 5, 15-095-01151 /	385 FSLIFNL	1595 FEL/FW)	OIL	PROD
<del>WSU #7</del>	JOE TJADEN A 2, 15 005 01110	330 FSL FNL	330 FELFWL	OIL	P&A 02/16/2007
WSU #8	JOE TJADEN A 4, 15-095-01150 /	1650 FSL)FNL	4950 FEL)FWL	OIL	PROD
WSU #9-	- JOE TJADEN A 1, 15 005 01117	2893 (FSL)FNL	5127 FEWFWL	GAS	P&A-03/06/2006
WSU #10	JOE TJADEN A 2, 15-095-01148	4290 FSL)FNL	4950 FEL FWL	OIL	PROD
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
***************************************		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

## A separate sheet may be attached if necessary

<sup>\*</sup> 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.