Form T-1 March 2010 Form must be Typed Form must be Signed All blanks must be Filled

Kansas Corporation Commission

OIL & GAS CONSERVATION DIVISION -

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

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form.

Check Applicable Boxes:	Effective Date of Transfer: July 1, 2012
☐ Oil Lease: No. of Oil Wells**	KS Dept of Revenue Lease No.: 203896
☑ Gas Lease: No. of Gas**	Lease Name: THORNE
☐ Gas Gathering System:	
	<u> </u>
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 27 23S 36W NE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from D E / D W Line	<u> </u>
☐ Enhanced Recovery Project Permit No.:	County: KEARNY
Entire Project: ☐ Yes ☐ No	Production Zone(s):CHASE
Number of injection wells	Injection Zone(s):
Field Name HUGOTON ** Side Two Must Be Completed.	
Surface Pit Permit No.	feet from □ N / □ S Line
(API No. if Drill Pit. WO or Haul) ☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	☐ Haul-Off ☐ Workover D ☐ Drilling
Past Operator's License No5952 Exp. 6/30/12 Past Operator's Name & Address	Contact Person: Lou Barry Room 3.142B WL-1 Phone 281-366-7816 Date 6/25/2012 Signature RECEIVED Contact Person: Nancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 KCC WICHITA
New Operator's License No. 33999	Contact Person: Nancy Fitzwater
New Operator's Name & Address Linn Operating, Inc.	Phone <u>281-840-4266</u>
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser KCC IV/Cura
Title Regulatory Compliance Advisor	Signature Nancy Fitzwaler
	as is acknowledged as
Authorized Signature	Authorized Signature
DISTRICT EPR 7/20/12	PRODUCTION 7.23.12 UIC 7-23-12
Mail to: Past Operator New	Operator District

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

Side Two Must Be Filed For All Wells

KDOR Lease No.:	203896				
*Lease Name:	THORNE	*Location:	27 23 36 SW SW	/ NE	
Well No.	AP No. (YR DRLD/PRE '67)		Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	150930013800 /	2690 FSL	2590 FEL	GAS	Producing
		- 			
		- -			
		-			
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				4-17	
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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.

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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form.

Check Applicable Boxes:	Effective Date of Transfer: July 1, 2012
□ Oil Lease: No. of Oil Wells**	KS Dept of Revenue Lease No.: 219287
☑ Gas Lease: No. of Gas**	Lease Name: THORNE
☐ Gas Gathering System:	<u>-SW_Sec_27_Twp23S_R_36W</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 27 23S 36W SW Qtr.
Spot Location:feet from □ N / □ S Line	
feet from D E / D W Line	
☐ Enhanced Recovery Project Permit No.:	County: KEARNY
Entire Project: ☐ Yes ☐ No	Production Zone(s):CHASE
Number of injection wells	Injection Zone(s):
Field Name HUGOTON ** Side Two Must Be Completed.	
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul) Type of Pit: Emergency Burn Settling	feet from □ N / □ S Line feet from □ E / □ W Line □ Haul-Off □ Workover □ Drilling
Past Operator's License No. 5952 Past Operator's Name & Address BP America Production Company P.O. Box 3092, Houston, TX 77253 Title Regulatory Supervisor	Contact Person: Lou Barry Room 3.142B WL-1 Phone 281-366-7816 Date 6/25/2012 Signature Lou Barry Room 3.142B WL-1 Signature
New Operator's License No. 33999	Contact Person: Nancy Fitzwater RECEIVED Phone 281-840-4266 Oil/Gas Purchaser JUL 0 2 2012 Date 6/25/2012
New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	Phone <u>281-840-4266</u> Oil/Gas Purchaser
Title Regulatory Compliance Advisor	Date 6/25/2012 Signature
recorded in the records of the Kansas Corporation Commission. This acknowledges not convey any ownership interest in the above injection well(s) or pit per	authorization, surface pit permit #has been noted, approved and duly ledgment of transfer pertains to Kansas Corporation Commission records only and mit.
is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action	
Date	Date
Authorized Signature	Authorized Signature
DISTRICTEPR	PRODUCTIONUIC
Mail to: Past Operator New Op	perator District

	Side Two
*	Must Be Filed For All Wells
₹	

KDOR Lease No.:	219287				
*Lease Name:	THORNE	*Location:	27 23 36 NE SW 5	5W	
Well No.	AP No. (YR DRLD/PRE '67)		m Section Line t from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
2Hf	150932126300 /	1250 FSL	4030 FEL	GAS	Producing
 					

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.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1 July 2010 Form Must be Typed Form Must be Signed All blanks must be Filled

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CE	3-1 (Cathodic Protection Borehole Intent) I T-1 (Transfer) CP-1 (Plugging Application)
5050	MAN Locations
OPERATOR: License #	Well Location:Sec. <u>27</u> Twp. <u>23S</u> R. <u>36W</u> □East ☑ West
Name: BP America Production Company	County: KEARNY
Address 1: P.O. Box 3092	Lease Name: THORNE Well #:
Address 2:	Lease Idaire. Trioring.
Contact Person: DeAnn Smyers	
Phone: (281) 366-4395	If filing a Form T-1 for multiple wells on a lease, enter the legal
Email Address: smyerscd@pp.com	description of the lease below:
Email Address: Sinyersdaegp.com	NE, SW Sec. 27 23S 36W
Surface Owner Information: Name: See Surface Owner Attachment Address 1:	When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.
may be submitted. Select one of the following:	
☑ I certify that, pursuant to the Kansas Surface Owner No owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the this form; and 3) my operator name, address, phone num	otice Act (House Bill 2032), I have provided the following to the surface RECEIV III be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required by 0.2.2 mber, fax, and email address.
the KCC will be required to send this information to the s	er(s). I acknowledge that, because I have not provided this information WICH surface owner(s). To mitigate the additional cost of the KCC performing to handling fee, payable to the KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 KSONA-1 form and the associated Form C-1, Form CB-1, Form	o handling fee with this form. If the fee is not received with this form, the T-1, or Form CP-1 will be returned.
hereby certify that the statements made herein are true and co	errect to the best of my knowledge and belief.
Date:June 25, 2012 Signature of Operator or Age	

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Name	Address1	Address2	City	State	7IP	ŝ	T	R
			7	-	-		1	
CEB INC	PO BOX 363		LAKIN	KS	67860	27	23	36W
MACARI, FAMILY TRUST ETAL	PO BOX 426	C.A	CANTON	KS	67428	27	23	36W
SOWER, KEN C & JACQUE L	2281 ROAD Z		DEERFIELD	KS	67838	27	23	36W

RECEIVED
JUL 0 2 2012
KCC WICHITA