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.

MOST DE SUDM	litted with this form.
Check Applicable Boxes:  Oil Lease: No. of Oil Wells**  Gas Lease: No. of Gas 1**  Gas Gathering System:  Saltwater Disposal Well - Permit No.:  Spot Location:feet from □ N / □ S Linefeet from □ E / □ W Line  Enhanced Recovery Project Permit No.:  Entire Project: □ Yes □ No	Effective Date of Transfer:
Number of injection wells  Field NameHUGOTON  *** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.  (API No. if Drill Pit. WO or Haul)  Type of Pit:   Emergency   Burn   Settling	feet from $\square$ N / $\square$ S Line feet from $\square$ E / $\square$ W Line  Haul-Off  Workover  O  Drilling
Past Operator's License No5952	Contact Person: Lou Barry Room 3.142B WL-1 Phone 281-366-7816 Date 6/25/2012  Signature Lou Barry  Contact Person: Nancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012
Acknowledgment of Transfer: The above request for transfer of injection a recorded in the records of the Kansas Corporation Commission. This acknowledgment convey any ownership interest in the above injection well(s) or pit perm	Signaturehas been noted, approved and duly edgment of transfer pertains to Kansas Corporation Commission records only and nit.
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action	the new operator of the above named lease containing the surface pit permitted by No.:
Authorized Signature  DISTRICTEPR7/30/12  Mail to: Past OperatorNew OperatorNew OperatorNew OperatorNew OperatorNew OperatorNew OperatorNew OperatorNew Operator	PRODUCTION 7.3/./2 UIC 1/23/-/2 JUIC 1/23/-/
Mail to: KCC - Conservation Division, 13	Authorized Signature  PRODUCTION 7. 3/. / 2 UIC 1/3 I-Q JUL 1/4 District District SO S. Market - Room 2078, Wichita, Kansas 67202  **CC WICHTA**

#### Side Two **Must Be Filed For All Wells**

KDOR Lease No.:	200217						
*Lease Name:		*Location:	7 26 32 SE NW				
Well No.	AP No. (YR DRLD/PRE '67)	Footage from	m Section Line at from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)		
1	150550065000 /	2640 FSL	2640 FEL	GAS	Producing		

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.

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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.: 219198
☑ Gas Lease: No. of Gas **	Lease Name: BARGER
□ Gas Gathering System:	
□ Saltwater Disposal Well - Permit No.:	SW Sec 7 Twp 26S R 32W □ E □ W
Spot Location:feet from □ N / □ S Line	Legal Description of Lease: Sec. 7 26S 32W SW Qtr.
feet from □ E / □ W Line	
☐ Enhanced Recovery Project Permit No.:	
Entire Project: ☐ Yes ☐ No	County: FINNEY
Number of injection wells	Production Zone(s):CHASE
Field Name HUGOTON Side Two Must Be Completed.	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
New Operator's License No33999 New Operator's Name & AddressLinn Operating, Inc600 Travis, Suite 5100 Houston, Texas 77002  TitleRegulatory Compliance Advisor	Signature Low Barry  Contact Person: Nancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012  Signature Nancy Fitzwater
Acknowledgment of Transfer: The above request for transfer of injection aut recorded in the records of the Kansas Corporation Commission. This acknowled does not convey any ownership interest in the above injection well(s) or pit permit	thorization, surface pit permit #has been noted, approved and duly
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action	the new operator of the above named lease containing the surface pit permitted by No.:
Date	
Authorized Signature	Date
	Authorized Signature
DISTRICT	
DISTRICTEPRP  Mail to: Past OperatorNew Opera	Authorized Signature  PRODUCTIONUIC atorDistrict  O. S. Market - Room 2078, Wichita, Kansas 67202

#### Side Two Must Be Filed For All Wells

KDOR Lease No.: _	219198				
*Lease Name:	BARGER	_ *Location:	7 26 32 NE SW SW		
Well No.	AP No. (YR DRLD/PRE '67)	Footage from (i.e. FS:L = Feet	Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
2HI	150552121300	1250 FSL	4030 FEL	GAS	Producing
					·

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.

### 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.

OPERATOR: License #5952	Well Location:					
Name: BP America Production Company						
Address 1: P.O. Box 3092	Sec. 7 Twp. 26S R. 32W □East ☑ West					
Address 2:	County: FINNEY					
City: Houston State: Texas Zip: 77253	Lease Name: <u>BARGER</u> Well #:					
Contact Person: DeAnn Smyers						
Phone: (281) 366-4395 Fax: (281) 366-7836	If filing a Form T-1 for multiple wells on a lease, enter the lega					
Email Address: smyerscd@bp.com	description of the lease below;					
	NW, SW Sec. 7 26S 32W					
Surface Owner Information:	When filing a Form T 4 invalid					
Name: See Surface Owner Attachment	When filing a Form T-1 involving multiple surface owners, attach an additional					
Address 1:	sheet listing all of the information to the left for each surface owner. Surface					
Address 2:	owner information can be found in the records of the register of deeds for the					
City: State: Zip:	county, and in the real estate property tax records of the county treasurer.					
n the plat are preliminary non-binding estimates. The locational pay be submitted.  elect one of the following:  I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or vice.  CP-1 that I am filing in connection with this form: 2) if	Notice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed in a Form C 1, Form CB-1, Form T-1, or Form					
In the plat are preliminary non-binding estimates. The locational pay be submitted.  Elect one of the following:  I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or we CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone not	Notice Act (House Bill 2032), I have provided the following to the surface will 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 umber, fax, and email address.					
In the plat are preliminary non-binding estimates. The locational period is a present the submitted.  Plect one of the following:  I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or voc. CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone not I have not provided this information to the surface own the KCC will be required to send this information to the	Notice Act (House Bill 2032), I have provided the following to the surface will 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 the composition. I acknowledge that, because I have not provided this information, sturface outport(s). To print the composition of the surface outport(s).					
In the plat are preliminary non-binding estimates. The locational period is any be submitted.  I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or voc. CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone not I have not provided this information to the surface own the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30.	Notice Act (House Bill 2032), I have provided the following to the surface will 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 the plat(s) and email address.  Der(s). I acknowledge that, because I have not provided this information, 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.					
In the plat are preliminary non-binding estimates. The locationary be submitted.  Plect one of the following:  I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or voc. CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone not I have not provided this information to the surface own the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30. Schoosing the second option, submit payment of the \$20.00.	the form being filed is a 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 umber, fax, and email address.  Her(s). I acknowledge that, because I have not provided this information, surface owner(s). To mitigate the additional cost of the KCC performing too handling fee, payable to the KCC, which is enclosed with this form.  To handling fee with this form. If the fee is not received with this form, the in T-1, or Form CP-1 will be returned.					

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



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