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.: 202012
☑ Gas Lease: No. of Gas**	Lease Name: <u>JENNINGS</u>
☐ Gas Gathering System:	<u>NE_</u> Sec_ <u>17_</u> Twp <u>_29S_R_38W_</u>
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 17 29S 38W NE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	
Enhanced Recovery Project Permit No.:	County: GRANT
Entire Project: ☐ Yes ☐ No	Production Zone(s): CHASE
	<u>i</u>
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)	feet from □ N / □ S Line ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	☐ Haul-Off ☐ Workover O R ☐ Drilling
Past Operator's Name & Address BP America Production Compared P.O. Box 3092, Houston, TX 77253 Title Regulatory Supervisor New Operator's License No. 33999	Date6/25/2012 Signature
New Operator's Name & Address Linn Operating, Inc.	10 44
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser
Title Regulatory Compliance Advisor	Signature Mancy FitzwaterKCC WICHITA
recorded in the records of the Kansas Corporation Commission. This addoes not convey any ownership interest in the above injection well(s) or	
the new operator and may continue to inject fluids as authorized by No.: Recommended action	
Date	Date
Authorized Signature	Authorized Signature
DISTRICTEPR8/9//2	PRODUCTION 8.10.12_uic8-10-12
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.	:				
*Lease Name:	<u>JENNINGS</u>	*Location:	17 29 38 C SW	SW NE	
Well No.	AP No. (YR DRLD/PRE '67)	_	n Section Line t from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	150670046700	2970 FSL	2310 FEL	GAS	Producing
				·	
·			·		
	,				
	· parameter ,				
	-				
	· , .	•			

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.

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.: 206834
☑ Gas Lease: No. of Gas**	Lease Name: <u>JENNINGS</u>
□ Gas Gathering System:	E2_Sec_17_Twp29S_R_38W_ □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 17 29S 38W E2
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	
□ Enhanced Recovery Project Permit No.:	County: GRANT
Entire Project: ☐ Yes ☐ No	Production Zone(s):COUNCIL GROVE
Number of injection wells	
Field NamePANOMA ** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.	feet from \square N / \square S Line
(API No. if Drill Pit. WO or Haul) ☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	feet from □ E / □ W Line □ Haul-Off □ Workover □ Drilling
Past Operator's License No5952 Past Operator's Name & AddressBP America Production Company P.O. Box 3092, Houston, TX 77253 TitleRegulatory Supervisor New Operator's License No33999 New Operator's Name & AddressLinn Operating, Inc600 Travis, Suite 5100 Houston, Texas 77002 TitleRegulatory Compliance Advisor	Date 6/25/2012
recorded in the records of the Kansas Corporation Commission. This acknowledged to the new operator and may continue to inject fluids as authorized by Pe	I as is acknowledged as
No.: Recommended action Date Authorized Signature	DateAuthorized Signature
DISTRICTEPRNew	PRODUCTIONUIC v Operator District

Side Two Must Be Filed For All Wells

9

KDOR Lease No.:	206834	***************************************			
*Lease Name:	JENNINGS	*Location:	17 29 38 E2	****	
Well No.	AP No. (YR DRLD/PRE '67)		n Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
2	150672018300 /	2590 FSL	1250 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.

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.

Che	eck Applicable Boxes:	Effective Date of Transfer: July 1, 2012
	Oil Lease: No. of Oil Wells**	KS Dept of Revenue Lease No.: 217695
	Gas Lease: No. of Gas**	Lease Name: JENNINGS
	Gas Gathering System:	<u>- SE_</u> Sec_ <u>17_</u> Twp <u>_29S_R_38W</u> _□ E □ W
	Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 17 29S 38W SE Qtr.
	Spot Location:feet from □ N / □ S Line	333 1 200 301 32 Qui.
	feet from □ E / □ W Line	
	Enhanced Recovery Project Permit No.:	County: GRANT
	Entire Project: ☐ Yes ☐ No	Production Zone(s):CHASE
	Number of injection wells	Injection Zone(s):
Fiel	d NameHUGOTON	
	** Side Two Must Be Completed.	
	face Pit Permit No. (API No. if Drill Pit. WO or Haul) Spe of Pit: Emergency Burn Settling	feet from □ N / □ S Line feet from □ E / □ W Line □ Haui-Off □ Workover □ Drilling
Pas P.O	t Operator's License No5952 t Operator's Name & Address BP America Production Company . Box 3092, Houston, TX 77253 Regulatory Supervisor	Contact Person:Lou Barry Room 3.142B WL-1 Phone281-366-7816 Date6/25/2012 Signature
New	Operator's License No. 33999 Operator's Name & Address Linn Operating, Inc. OO Travis, Suite 5100 Houston, Texas 77002	Contact Person: Nancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012
TITLE	Regulatory Compliance Advisor	Signature Nancy Filtzwater
reco		uthorization, surface pit permit #has been noted, approved and dudgment of transfer pertains to Kansas Corporation Commission records only anit.
the No.:	new operator and may continue to inject fluids as authorized by Permit Recommended action	the new operator of the above named lease containing the surface pit permitted by No.:
Date	Authorized Signature	Date Authorized Signature
	*	
	STRICTEPR	PRODUCTIONUIC prator District

Side Two Must Be Filed For All Wells

KDOR Lease No.:	217695	/			
*Lease Name:		*Location:	17 29 38 NW SE	SE	
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)
ЗНІ	150672109400	1250 FSL	1250 FEL	GAS	Producing
		_			
					1

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.

OPERATOR: License #5952	Well Location:
Name: BP America Production Company	Sec. <u>17</u> Twp. <u>29S</u> R. <u>38W</u> □East ☑ West
Address 1: P.O. Box 3092	County: GRANT
Address 2:	Lease Name:JENNINGS Well #:
City: Houston State: Texas Zip: 77253	
Contact Person: DeAnn Smyers	If filing a Form T-1 for multiple wells on a lease, enter the lega
Phone: (281) 366-4395 Fax: (281) 366-7836	description of the lease below:
Email Address: <u>smyerscd@bp.com</u>	NE, E2, SE Sec. 17 29S 38W
Surface Owner Information: 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.
d the KCC with a plat showing the predicted locations of lea the plat are preliminary non-binding estimates. The location	1 (Cathodic Protection Borehole Intent), you must supply the surface owners ase roads, tank batteries, pipelines, and electrical lines. The locations showr ns may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plan
nd the KCC with a plat showing the predicted locations of lea on the plat are preliminary non-binding estimates. The location ay be submitted.	ase roads, tank batteries, pipelines, and electrical lines. The locations showr ns may be entered on the Form C-1 plat, Form CB-1 plat, or a separate pla
nd the KCC with a plat showing the predicted locations of lea n the plat are preliminary non-binding estimates. The location nay be submitted. elect one of the following:	ase roads, tank batteries, pipelines, and electrical lines. The locations showrns may be entered on the Form C-1 plat, Form CB-1 plat, or a separate pla
nd the KCC with a plat showing the predicted locations of lean the plat are preliminary non-binding estimates. The location has 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	ase roads, tank batteries, pipelines, and electrical lines. The locations shown in s may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plate of the surface of the surfac
and the KCC with a plat showing the predicted locations of lead in the plat are preliminary non-binding estimates. The location and 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 with CP-1 that I am filling in connection with this form; 2) if this form; and 3) my operator name, address, phone nu	RECONSIDER SHOWS AND SHOWS
d the KCC with a plat showing the predicted locations of lead the plat are preliminary non-binding estimates. The location at be submitted. Ilect 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 worker. It was filling in connection with this form; 2) if this form; and 3) my operator name, address, phone nuture. I have not provided this information to the surface owner the KCC will be required to send this information to the	ase roads, tank batteries, pipelines, and electrical lines. The locations shown in s may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plate of the 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 C mber, fax, and email address. er(s). I acknowledge that, because I have not provided this information, surface owner(s). To mitigate the additional cost of the KCC performing
and the KCC with a plat showing the predicted locations of lead in the plat are preliminary non-binding estimates. The location and 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 worder. That I am filling in connection with this form; 2) if this form; and 3) my operator name, address, phone nuture. I have not provided this information to the surface owner the KCC will be required to send this information to the	RECONSIDER SHOWS AND SHOWS
and the KCC with a plat showing the predicted locations of lead in the plat are preliminary non-binding estimates. The location and be submitted. ■ I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or with CP-1 that I am filling in connection with this form; 2) if this form; and 3) my operator name, address, phone nuted the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30.00 choosing the second option, submit payment of the \$30.00 choosing the second option, submit payment of the \$30.00 choosing the second option, submit payment of the \$30.00 choosing the second option, submit payment of the \$30.00 choosing the second option, submit payment of the \$30.00 choosing the second option.	RECOME SHOW THE PRINCE OF THE
nd the KCC with a plat showing the predicted locations of lean the plat are preliminary non-binding estimates. The location hay 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 worder. That I am filing in connection with this form; 2) if the this form; and 3) my operator name, address, phone nuture. I have not provided this information to the surface owner the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30.	otice 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 C mber, fax, and email address. er(s). I acknowledge that, because I have not provided this information, surface owner(s). To mitigate the additional cost of the KCC performing 00 handling fee, payable to the KCC, which is enclosed with this 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.

Name	Address1	Address2	City	State	AIZ	Sec	d W
JENNINGS FARMS LC	PO BOX 913		HOSINIFICE	V.	67504 0012	;	3
COORER MICHAELE				3	0/304-0513	1/	23
כסטר בוי, ואוכחאבר ב	601 BENTLY DR		LAWRENCE	S	66049	17	29
SLEMP, CARL W	PO BOX 683		HVSSES	VC.	0.002	;	3
			0113313	5	0/000	_	29

RECEIVED
JUL 0 3 2012
KCC WICHITA