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.: 206885
☑ Gas Lease: No. of Gas**	Lease Name: LINDSLEY
☐ Gas Gathering System:	<u>- E2_Sec_22_Twp30S_R_40W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 22 30S 40W E2
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	
□ Enhanced Recovery Project Permit No.:	County: STANTON
Entire Project: ☐ Yes ☐ No	
Number of injection wells	Injection Zone(s): COUNCIL GROVE
Field Name PANOMA	injection zone(s).
	In the second control of the second control
	(P)
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul)	feet from D N / D S Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	feet from \square E / \square W Line \square Haul-Off \square Workover \bigcirc \square \square Drilling
Past Operator's License No. 5952 Exp 1a/30//2 Past Operator's Name & Address BP America Production Company P.O. Box 3092, Houston, TX 77253 Title Regulatory Supervisor New Operator's License No. 33999 New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	Contact Person: Lou Barry Room 3.142B WL-1 Phone 281-366-7816 Date 6/25/2012 Signature Sarry Contact Person: Nancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Contact Person: Nancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser
Title Regulatory Compliance Advisor	Date 6/25/2012 Signature 7/2012
Acknowledgment of Transfer: The above request for transfer of injection au 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 perm is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action	adgment of transfer pertains to Kansas Corporation Commission records only an
DateAuthorized Signature	Date Authorized Signature
DISTRICTEPR_8/6/12-	PRODUCTION 8.7.12 UIC 8.7-13
Mail to: Past Operator New Ope	

Side Two Must Be Filed For All Wells

KDOR Lease No.:	206885 V				
*Lease Name:	LINDSLEY	*Location:	22 30 40 C E2		
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)
2	151872028400 /	2540 FNL	1320 FEL	GAS	Producing
			,		
				<u> </u>	

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>22</u> Twp. <u>30S</u> R. <u>40W</u> □East ☑ West
Address 1: P.O. Box 3092	County: STANTON
Address 2:	Lease Name: LINDSLEY Well #:
City: Houston State: Texas Zip: 77253	
Contact Person: <u>DeAnn Smyers</u>	If filing a Form T-1 for multiple wells on a lease, enter the legal
Phone: (281) 366-4395 Fax: (281) 366-7836	description of the lease below:
Email Address: smyerscd@bp.com	E2 Sec. 22 30S 40W
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.
nd 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 shown ns may be entered on the Form C-1 plat, Form CB-1 plat, or a sep
nd the KCC with a plat showing the predicted locations of lean on the plat are preliminary non-binding estimates. The location	ase roads, tank batteries, pipelines, and electrical lines. The locations shown ns may be entered on the Form C-1 plat, Form CB-1 plat, or a sep
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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 we	lotice Act (House Bill 2032), I have provided the following to the Godwill 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
and the KCC with a plat showing the predicted locations of learn the plat are preliminary non-binding estimates. The location has be submitted. Belect 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 w CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone nuthe KCC will be required to send this information to the	lotice Act (House Bill 2032), I have provided the following to the Gram T-1, or Form the form C-1 or Form CB-1, the plat(s) required by
Ind the KCC with a plat showing the predicted locations of learn the plat are preliminary non-binding estimates. The location has be submitted. Belect 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 filing 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 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.	lotice Act (House Bill 2032), I have provided the following to the form the form C-1 plat, Form CB-1 plat, or a separative 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 amber, fax, and email address. I acknowledge that, because I have not provided this information, a 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, the
Ind the KCC with a plat showing the predicted locations of learn the plat are preliminary non-binding estimates. The location hay be submitted. **Belect 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 w CP-1 that I am filing 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.	dotice Act (House Bill 2032), I have provided the following to the form C-1 plat, Form CB-1 plat, or a separative 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. Der(s). I acknowledge that, because I have not provided this information, a surface owner(s). To mitigate the additional cost of the KCC performing the company of the form. If the fee is not received with this form, the control of the form CP-1 will be returned.

RECEIVED JUL 0 3 2012 KCC WICHITA

Name	Address1	Address2	City	State	ZIP	Sec	Twp	Rng
SNOWBARGER, VERLA J & RONALD S	10463 E RD 17		JOHNSON	ĸs	67855	22	30	40W
KERSEY, LYLE W & K ELLEN	10026 S RD H		JOHNSON	KS	67855	22	30	40W
FEIERTAG, SARAH ELLEN LIVING TRUST	8601 SHANNON WAY		WICHITA	ĸ	67206	22	30	40W
SHORE, HAROLD & HELEN TRUST	6039 E RD 23		NOSNHOL	KS	67855	22	30	40W
PARKS, DONOVAN LETAL	112 E BURNSIDE DR		GARDEN CITY	KS	67846	22	30	40W
LINDSLEY, DAVID L	5953 E EDISON		TUSCON	AZ	85712	22	30	40W