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.: 225211
☑ Gas Lease: No. of Gas**	Lease Name: MILES A
☐ Gas Gathering System:	<u>- NE</u> Sec_ <u>11_</u> Twp <u>32S_R40W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 11 32S 40W NE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	
□ Enhanced Recovery Project Permit No.:	County: MORTON
Entire Project: ☐ Yes ☐ No	Production Zone(s):CHASE
Number of injection wells	Injection Zone(s):
Field Name HUGOTON	injectori Zerio(e).
* Side Two Must Be Completed.	
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul)	feet from D N / D S Line feet from D E / D W Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settli	ing ☐ Haul-Off ☐ Workover ☐ Drilling
Past Operator's License No. <u>5952</u> Past Operator's Name & Address <u>BP America Production Con</u> P.O. Box 3092, Houston, TX 77253 Title <u>Regulatory Supervisor</u>	Date 6/25/2012 RECEIVED
New Operator's License No. 33999	Contact Person: Nancy Fitzwater
New Operator's Name & Address <u>Linn Operating, Inc.</u> 600 Travis, Suite 5100 Houston, Texas 77002	Phone <u>281-840-4266</u> NCC WICHITA Oil/Gas Purchaser
	Date <u>6/25/2012</u>
Title Regulatory Compliance Advisor	Signature Nancy Titywaler
recorded in the records of the Kansas Corporation Commission. The does not convey any ownership interest in the above injection well(s)	wledged as by Permit is acknowledged as the new operator of the above named lease containing the surface pit
Date Authorized Signature	Date Authorized Signature
DISTRICTEPR	PRODUCTIONUIC
Mail to: Past Operator	New Operator District

Side Two Must Be Filed For All Wells

KDOR Lease No.:	206916	7	-		
*Lease Name:	MILES A	*Location:	11 32 40 C S2		
Well No.	AP No. (YR DRLD/PRE '67)		om Section Line et from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
A2	151292029600	1470 FSL	2540 FEL	GAS	Producing
- 1906-					

		-			
		-		• • • • • • • • • • • • • • • • • • • •	
				 	
· · · · · · · · · · · · · · · · · · ·		· ———			
**************************************		-			
The state of the s			- 187-4		
		*		***************************************	

		-			
<u> </u>	and the desired and the second are the second and t	-			

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.: 202612
☑ Gas Lease: No. of Gas**	Lease Name: MILES A
☐ Gas Gathering System:	<u>SE_Sec_11_Twp32S_R_40W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 11 32S 40W SE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	
☐ Enhanced Recovery Project Permit No.:	County: MORTON
Entire Project: ☐ Yes ☐ No	Production Zone(s): CHASE
Number of injection wells	Injection Zone(s):
Field Name HUGOTON	injection Zono(s).
Sice Technis (Ba 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. <u>5952</u> Past Operator's Name & Address <u>BP America Production Company</u> P.O. Box 3092, Houston, TX 77253 Title <u>Regulatory Supervisor</u>	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 RECEIVED Contact Person: Nancy Fitzwater KCC WICHITA Phone 281-840-4266
New Operator's License No. 33999 New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	Contact Person: Nancy Fitzwater KCC WICHITA Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012
Title Regulatory Compliance Advisor	Signature Mancy Fitzwater
	s is acknowledged as
Date Authorized Signature	Date Authorized Signature
DISTRICT EPR	PRODUCTIONUIC
	perator District

Side Two Must Be Filed For All Wells

KDOR Lease No.:	202612	Se must be	_		
*Lease Name:	MILES A	*Location:	11 32 40 NW NW I	NW SE	
Well No.	AP No. (YR DRLD/PRE '67)	-	om Section Line et from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
A1	151290023000 /	5 2490 F X IL	2490 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.

OPERATOR: License #5952	Well Location:
Name: BP America Production Company	Sec. 11_Twp. 32S_R. 40W_□East ☑ West
Address 1: P.O. Box 3092	County: MORTON
Address 2:	Lease Name: MILES A 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 legal
Phone: (281) 366-4395 Fax: (281) 366-7836	description of the lease below:
Email Address: smyerscd@bp.com	NE, S2, SE Sec. 11 32S 40W
Surface Owner Information: Name: See Surface Owner Attachment Address 1: Address 2:	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 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.
City: State: Zip:	
and the KCC with a plat showing the predicted locations of lon the plat are preliminary non-binding estimates. The location	3-1 (Cathodic Protection Borehole Intent), you must supply the surface owners lease roads, tank batteries, pipelines, and electrical lines. The locations shown ions may be entered on the Form C-1 plat, Form CB-1 plat, or a separations
and the KCC with a plat showing the predicted locations of lon the plat are preliminary non-binding estimates. The location	lease roads, tank batteries, pipelines, and electrical lines. The locations shown ions may be entered on the Form C-1 plat, Form CB-1 plat, or a separation
and the KCC with a plat showing the predicted locations of lon the plat are preliminary non-binding estimates. The locati	lease roads, tank batteries, pipelines, and electrical lines. The locations shown ions may be entered on the Form C-1 plat, Form CB-1 plat, or a separation
and the KCC with a plat showing the predicted locations of long the plat are preliminary non-binding estimates. The locationary be submitted. Select one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or	Notice Act (House Bill 2032), I have provided the following to the will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form of 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 locationary be submitted. Select one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone in I have not provided this information to the surface ow the KCC will be required to send this information to the	Notice Act (House Bill 2032), I have provided the following to the will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form of 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 light the plat are preliminary non-binding estimates. The locationary be submitted. Select one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) in this form; and 3) my operator name, address, phone in 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 for choosing the second option, submit payment of the \$30.	Notice Act (House Bill 2032), I have provided the following to the will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by number, fax, and email address. I acknowledge that, because I have not provided this information, he surface owner(s). To mitigate the additional cost of the KCC performing 10.00 handling fee, payable to the KCC, which is enclosed with this form.
and the KCC with a plat showing the predicted locations of It on the plat are preliminary non-binding estimates. The locationary be submitted. Select one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) in this form; and 3) my operator name, address, phone in I have not provided this information to the surface ow the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$3	Notice Act (House Bill 2032), I have provided the following to the will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form of the form being filed is a Form C-1 or Form CB-1, the plat(s) required by number, fax, and email address. I acknowledge that, because I have not provided this information, he surface owner(s). To mitigate the additional cost of the KCC performing 10.00 handling fee, payable to the KCC, which is enclosed with this form.

BEACHNER SW FARMING CO P O BOX 128 ST PAUL KS	SEABOARD FARMS, INC 9000 W 67TH ST; STE 200 SHAWNEE MISSION KS	MILES, VIRGIL TRST PO BOX 169 FREMONT NE	Name Address1 Address2 City State
KS.	KS	NE	State
66771-0128	66202	68026-0169	ZIP
11	11	11	Sec
32	32	32	Twp
40W	40W	40W	Rng

RECEIVED
JUL 0 3 2012
KCC WICHITA