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.

Oil Lease: No. of Oil Wells	ly 1, 2012	
Gas Gathering System: Gas Gathering System: Saltwater Disposal Well - Permit No: Spot Location: feet from N / S Line feet from E / W Line County: GRANT Production Zone(s): ChAS Injection Zone(s): Surface Pit Permit No. (API No. if Drill Pit. WO or Haul) Type of Pit: Emergency Burn Settling Contact Person: Lou Barry Room 3 Phone 281-386-7816 Pool 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 Title Regulatory Compliance Advisor Title Regulatory Compliance Advisor Title Regulatory Compliance Advisor Acknowledgment of Transfer: The above request for transfer of injection well(s) or pit permit # recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation well(s) or pit permit is acknowledgment of transfer pertains to Kansas Corporation well(s) or pit permit the new operator of the above named let	202956	
□ Saltwater Disposal Well - Permit No. □ Legal Description of Lease: Sec. 7.5 Spot Location: □ feet from □ N / □ S Line □ feet from □ E / □ W Line □ Enhanced Recovery Project Permit No.: Entire Project: □ Yes □ No Number of injection wells Number of injection wells Field Name HUGOTON Side Two Must Be Completed. Surface Pit Permit No. □ Type of Pit: □ Emergency □ Burn □ Settling □ Haul-Off □ Workover □ □ □ Type of Pit: □ Emergency □ Burn □ Settling □ Contact Person: Lou Barry Room 3 Past Operator's License No. 5952 Exp V/33 / 12 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 License No. 33999 ✓ New Operator's License No. 33999 ✓ New Operator's Name & Address □ Linn Operating, Inc. □ Phone □ 281-840-4266 Oil/Gas Purchaser □ Date □ 6/25/2012 Title Regulatory Compliance Advisor Signature **Contact Person: Nancy Fitzwater Phone □ 281-840-4266 Oil/Gas Purchaser □ Date □ 6/25/2012 Signature **Contact Person: Nancy Fitzwater Phone □ 281-840-4266 Oil/Gas Purchaser □ Date □ 6/25/2012 Signature **Contact Person: Nancy Fitzwater Phone □ 281-840-4266 Oil/Gas Purchaser □ Date □ 6/25/2012 Signature **Contact Person: Nancy Fitzwater Phone □ 281-840-4266 Oil/Gas Purchaser □ Date □ 6/25/2012 Signature **Contact Person: Nancy Fitzwater Phone □ 281-840-4266 Oil/Gas Purchaser □ Date □ 6/25/2012 Signature **Contact Person: Nancy Fitzwater Phone □ 281-840-4266 Oil/Gas Purchaser □ Date □ 6/25/2012 Signature **Contact Person: Nancy Fitzwater Phone □ 281-840-4266 Oil/Gas Purchaser □ Date □ 6/25/2012 Signature **Contact Person: Nancy Fitzwater Phone □ 281-840-4266 Oil/Gas Purchaser □ Date □ 6/25/2012 Signature **Contact Person: Nancy Fitzwater Phone □ 281-840-4266 Oil/Gas Purchaser □ Date □ 6/25/2012 Signature **Contact Person: Nancy Fitzwater Phone □ 281-840-4266 Oil/Gas Purchaser □ Date □ 6/25/2012 Signature **Contact Person: Nancy Fitzwater Phone □ 281-840-4266 Oil/Gas Purchaser □ Date □ 6/		
Spot Location:feet from N / S Line	<u>38W</u> □ E □ W	
feet from □ E / □ W Line □ Enhanced Recovery Project Permit No: Entire Project: □ Yes □ No Production Zone(s): □ CHAS Injection Zone(s): □ CHAS Injection Zone(s): □ CHAS Injection Zone(s): □ Production Zone(s): □ CHAS Injection Zone(s): □ CHAS Inje	27S 38W SW Qtı	Г
□ Enhanced Recovery Project Permit No.: Entire Project: □ Yes □ No Production Zone(s): □ CHAS Injection Zone(s): □ COntact Person:		
Production Zone(s):		
Number of injection wells		
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul) Past Operator's License No. 5952 Exp b/35/12 Past Operator's Name & Address BP America Production Company Po. Box 3092, Houston, TX 77253 Title Regulatory Supervisor New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002 Title Regulatory Compliance Advisor Title Regulatory Compliance Advisor Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation authorized by Permit is acknowledged as the new operator of the above named to the new	SE	-3
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul) Type of Pit: Emergency Burn Settling Haul-Off Workover		- 0112 - 2
Contact Person: Lou Barry Room 3 Past Operator's License No. 5952 Exp U 35 U 2 Contact Person: Lou Barry Room 3 Phone 281-366-7816 Date 6/25/2012		Me f
Type of Pit: Emergency Burn Settling Haul-Off Workover Past Operator's License No. 5952 Exp 1/3 1/2 Contact Person: Lou Barry Room 3 Past Operator's Name & Address BP America Production Company Phone 281-366-7816 Date 6/25/2012	S Line	int.
Past Operator's License No5952	W Line	•
Past Operator's Name & Address		
New Operator's License No. 33999 Contact Person: Nancy Fitzwater New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002 Title Regulatory Compliance Advisor Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation convey any ownership interest in the above injection well(s) or pit permit. Is acknowledged as the new operator and may continue to inject fluids as authorized by Permit the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operator of the above named legical transfer pertains to the new operat		
New Operator's Name & Address	7	
recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation on the convey any ownership interest in the above injection well(s) or pit permit. is acknowledged as the new operator and may continue to inject fluids as authorized by Permit the new operator of the above named leading to the new operator of the new operato		
	oration Commissi	cknowledged as
/ /	norized Signature	JUL 03 2012
DISTRICTEPR	30-12 L	Or Ex
Mail to: Past Operator Di	strict	C 14. 2012

Side Two Must Be Filed For All Wells

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KDOR Lease No.:	202956	<i>Y</i>	75 18 11

*Lease Name:	NEFF B	*Location:	7 27 38 NE NE NE	SW	
Well No.	AP No. (YR DRLD/PRE '67)	_	rom Section Line eet from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	150670035600 /	2640 FSL	2640 FEL	GAS	Producing
		- APPENDIX OF THE PROPERTY OF			
		-			
· · · · · · · · · · · · · · · · · · ·					
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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.

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.

☐ Gas Lease: No. of Gas*** ☐ Gas Gathering System:	Revenue Lease No.: 217897 ne: NEFF B NE Sec 7 Twp 27S R 38W □ E □ W cription of Lease: Sec. 7 27S 38W NE Qtr. GRANT a Zone(s): CHASE cone(s):
□ Gas Gathering System: □ Saltwater Disposal Well - Permit No.: Spot Location: feet from □ N / □ S Line feet from □ E / □ W Line □ Enhanced Recovery Project Permit No.: Entire Project: □ Yes □ No	NE_Sec_7_Twp27S_R_38W_□ E □ W cription of Lease:Sec. 7 27S 38W NE Qtr. GRANT a Zone(s):CHASE
□ Saltwater Disposal Well - Permit No.: Legal Description Spot Location:feet from □ N / □ S Line feet from □ E / □ W Line □ Enhanced Recovery Project Permit No.: Entire Project: □ Yes □ No Production Number of injection wells Field Name HUGOTON **Side Two Must Se Completed Surface Pit Permit No. (API No. if Drill Pit. WO or Haul) □ Type of Pit: □ Emergency □ Burn □ Settling □ Haul-Oft Past Operator's License No Contact Perent Permit No Past Operator's License No Contact Perent Permit No Past Operator's Name & Address Contact Perent Permit No	GRANT a Zone(s): CHASE
Spot Location:feet from □ N / □ S Linefeet from □ E / □ W Line □ Enhanced Recovery Project Permit No.: Entire Project: □ Yes □ No Production Number of injection wells Injection Zerolation Number of injection wells Injection Zerolation Side Two Must Be Completed. Surface Pit Permit No. (API No. if Drill Pit. WO or Haul) □ Type of Pit: □ Emergency □ Burn □ Settling □ Haul-Off Past Operator's License No Contact Perposition Company Past Operator's Name & Address BP America Production Company	GRANT 2 Zone(s): CHASE
feet from □ E / □ W Line □ Enhanced Recovery Project Permit No.: Entire Project: □ Yes □ No Production Number of injection wells Injection Zerolation 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 □ Haul-Off Past Operator's License No. 5952 Past Operator's Name & Address ■ BP America Production Company County: County: County: County: Production Injection Zerolation Contact Permit No. Contact Permit No. BP America Production Company	a Zone(s): CHASE
□ Enhanced Recovery Project Permit No.: Entire Project: □ Yes □ No Production Number of injection wells Injection Zero 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 □ Haul-Off Past Operator's License No Contact Perest Operator's Name & Address BP America Production Company	a Zone(s): CHASE
Entire Project:	a Zone(s): CHASE
Entire Project:	a Zone(s): CHASE
Number of injection wells Injection Zetal Name HUGOTON Side Two Must Be Completed. Surface Pit Permit No (API No. if Drill Pit. WO or Haul) Haul-Off	
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul) Type of Pit: Emergency Burn Settling Haul-Off Past Operator's License No. 5952 Past Operator's Name & Address BP America Production Company	
(API No. if Drill Pit. WO or Haul) ☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off Past Operator's License No5952	
□ Type of Pit: □ Emergency □ Burn □ Settling □ Haul-Off Past Operator's License No. <u>5952</u> Contact Perest Operator's Name & Address <u>BP America Production Company</u> Phone <u>2</u>	feet from □ N / □ S Line
Past Operator's License No. <u>5952</u> Contact Perent C	feet from □ E / □ W Line ff □ Workover □ Drilling
Past Operator's Name & Address BP America Production Company Phone 2	
Past Operator's Name & Address BP America Production Company Phone 2	erson: Lou Barry Room 3.142B WL-1
	281-366-7816
	6/25/2012
Title Regulatory Supervisor Signature	Lou Barry
New Operator's License No33999 Contact Pe	erson: Nancy Fitzwater
New Operator's Name & Address Linn Operating, Inc. Phone	281-840-4266
	urchaser25/2012
Title Beguleten Compliance Advisor	Nancy Fitzwater
Acknowledgment of Transfer: The above request for transfer of injection authorization, surfaceorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer of transfer of injection well(s) or pit permit.	face pit permit #has been noted, approved and duly fer pertains to Kansas Corporation Commission records only and
	is acknowledged as rator of the above named lease containing the surface pit No.:
Date Date	
Authorized Signature	Authorized Signature
DISTRICTEPRPRODUCTION	
Mail to: Past Operator New Operator	Ju Silva

Side Two Must Be Filed For All Wells

KDOR Lease No.:	217897	<i>V</i>	_		
*Lease Name:	NEFF B	*Location:	7 27 38 NW SE NE		
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)
3HI	150672110500 🗸	3830 FSL	1250 FEL	GAS	Producing

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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.

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.: 206943
☑ Gas Lease: No. of Gas**	Lease Name: <u>NEFF B</u>
□ Gas Gathering System:	<u></u>
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: <u>Sec. 7 27S 38W S2</u>
Spot Location:feet from □ N / □ S Line	
feet from \square E / \square W Line	
☐ Enhanced Recovery Project Permit No.:	County:GRANT
Entire Project: ☐ Yes ☐ No	Production Zone(s):COUNCIL GROVE
Number of injection wells	Injection Zone(s):
Field NamePANOMA ** 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	feet from □ E / □ W Line □ Haul-Off □ Workover □ Drilling
	Litiau-Oii Livorkovei Libining
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	Contact Person:Lou Barry Room 3.142B WL-1 Phone281-366-7816 Date6/25/2012
Title Regulatory Supervisor	Signature Lou Barry
New Operator's License No. 33999	Contact Person: Nancy Fitzwater
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 <u>6/25/2012</u>
The Tregulatory Compilarios Advisor	Signature
•	uthorization, surface pit permit #has been noted, approved and duly dgment of transfer pertains to Kansas Corporation Commission records only and it.
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action	is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.:
Date Authorized Signature	PRODUCTIONUIC
DISTRICTEPRNew One	PRODUCTIONUICK0 3 3
Mail to: Past Operator New Ope	prator
Mail to: KCC - Conservation Division, 1	30 S. Market - Room 2078, Wichita, Kansas 67202

Side Two Must Be Filed For All Wells

KDOR Lease No.:	206943		<u> </u>		
*Lease Name:	NEFF B	*Location:	7 27 38 C S2		
Well No.	AP No. (YR DRLD/PRE '67)		rom Section Line eet from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
2	150672018800	1250 FSL	2540 FEL	GAS	Producing
				3444	

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.

Name: BP America Production Company Address 1: P.O. Box 3092	Well Location:Sec. 7_ Twp. <u>27S</u> R. <u>38W</u> □East ☑ West County:GRANT
Address 2:	Lease Name: NEFF B Well #:
City: Houston State: Texas Zip: 77253 Contact Person: DeAnn Smyers Phone: (281) 366-4395 Fax: (281) 366-7836 Email Address: smyerscd@bp.com	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: SW, NE, S2 Sec. 7 27S 38W
Surface Owner Information:	When filing a Form T-1 involving multiple surface owners, attach an additional
Name: See Surface Owner Attachment Address 1: Address 2:	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.
City: State: Zip:	
CP-1 that I am filing in connection with this form; 2) if t	vill 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
this form; and 3) my operator name, address, phone nu	ımber, fax, and email address.
☐ I have not provided this information to the surface own the KCC will be required to send this information to the	nmber, 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.
☐ 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 \$30.0 choosing the second option, submit payment of the \$30.0 choosing the second option, submit payment of the \$30.0 choosing the second option.	ner(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. 10 handling fee with this form. If the fee is not received with this form, the
☐ 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 \$30.0 choosing the second option, submit payment of the \$30.0 SONA-1 form and the associated Form C-1, Form CB-1, Form	ner(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. If the fee is not received with this form, the m T-1, or Form CP-1 will be returned.
☐ 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 \$30.0 choosing the second option, submit payment of the \$30.0 SONA-1 form and the associated Form C-1, Form CB-1, Form	ner(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. 10 handling fee with this form. If the fee is not received with this form, the m T-1, or Form CP-1 will be returned. 11 orrect to the best of my knowledge and belief.
□ 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 \$30.0 CCOONS. I choosing the second option, submit payment of the \$30.0 CCOONS. I form and the associated Form C-1, Form CB-1, Form thereby certify that the statements made herein are true and counter the second option. Signature of Operator or Agents:	ner(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. 10 handling fee with this form. If the fee is not received with this form, the m T-1, or Form CP-1 will be returned. 11 orrect to the best of my knowledge and belief.
□ 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 \$30.0 ksONA-1 form and the associated Form C-1, Form CB-1, Form the certify that the statements made herein are true and countries. □ June 25, 2012 Signature of Operator or Agents.	ner(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. 10 handling fee with this form. If the fee is not received with this form, the m T-1, or Form CP-1 will be returned. 11 orrect to the best of my knowledge and belief.
□ 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 \$30.0 CCOONS. I choosing the second option, submit payment of the \$30.0 CCOONS. I form and the associated Form C-1, Form CB-1, Form thereby certify that the statements made herein are true and counter the second option. Signature of Operator or Agents:	ner(s). I acknowledge that, because I have not provided this information, a 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. 10 handling fee with this form. If the fee is not received with this form, the m T-1, or Form CP-1 will be returned. 11 orrect to the best of my knowledge and belief. 12 Gent: Regulatory Supervisor

Name	Address1	Address2	City	State	ZIP	Sec	√p	콛
RIDER, MERL F & BETH N	PO BOX 1130		LAKIN	KS	67860	7	27	38
BEAR CREEK PARTNERS	21 BLUE JAY DR		SANTA FE	NM	87506	7	27	38
NEFF, JANE CLOE MASSEY TRUST	100 INDEPENDENCE PL STE 307		TYLER	ΤX	75703	7	27	38

RECEIVED JUL 03 2012

KCC WICHITA