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.: 203525
☑ Gas Lease: No. of Gas**	Lease Name: SCHMITZ, FRANK J.
□ Gas Gathering System:	<u>SW_</u> Sec_3_Twp27S_R_38W_ □ E □ W
□ Saltwater Disposal Well - Permit No.:	
Spot Location:feet from □ N / □ S Line	Legal Description of Lease: Sec. 3 27S 38W SW Qtr.
feet from □ E / □ W Line	N i
☐ Enhanced Recovery Project Permit No.:	H ODINE
Entire Project: □ Yes □ No	Production Zone(s): CHASE
Number of injection wells	Intection Zone(s).
Field Name HUGOTON *** Side Two Must Be Completed.	p.
Surface Pit Permit No.	feet from □ N / □ S Line
(API No. if Drill Pit. WO or Haul)	feet from □ E / □ W Line □ Haul-Off □ Workover □ Drilling
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	Triad-Cit Livinovci Librining
Root Operator's License No. 5952 FX 0 1-130/12	Contact Person: Lou Barry Room 3.142B WL-1
Past Operator's License No. <u>5952</u> Exp <u>U/30/12</u> Past Operator's Name & Address <u>BP America Production Company</u>	Phone <u>281-366-7816</u>
P.O. Box 3092, Houston, TX 77253	Date <u>6/25/2012</u>
Title Regulatory Supervisor	Signature <u>Low Barry</u>
New Operator's License No. 33999	Contact Person: Nancy Fitzwater
New Operator's Name & Address Linn Operating, Inc.	Phone 281-840-4266
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser Date6/25/2012
Title Regulatory Compliance Advisor	Signature Mancy Fitzwaler
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 permit	dgment of transfer pertains to Kansas Corporation Commission records only an
is acknowledged as	is acknowledged as
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.:
DateAuthorized Signature	DateAuthorized Signature
DISTRICTEPR8/1/12	PRODUCTION Y, 8 · / 2UIC 8 - 8 - 2 UIC Brator District District To Solve State
Mail to: Past Operator New Ope	erator District

Side Two Must Be Filed For All Wells

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KDOR Lease No.:	203525	

*Lease Name:	SCHMITZ, FRAN	K J *L	ocation: <u>3 27 3</u>	8 NE NE SW	_
Well No.	AP No. (YR DRLD/PRE '67)		m Section Line of from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	150670035200	2310 FSL	2310 F ¥ L	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.

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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.: 207850
☑ Gas Lease: No. of Gas**	Lease Name: SCHMITZ, FRANK J.
☐ Gas Gathering System:	<u>NE_Sec_3_Twp27S_R_38W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 3 27S 38W NE Qtr.
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. (API No. if Drill Pit. WO or Haul)	feet from □ N / □ S Line feet from □ E / □ W Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	☐ 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, Inc.	Contact Person: Lou Barry Room 3.142B WL-1 Phone 281-366-7816 Date 6/25/2012 Signature Zou Sarry Contact Person: Nancy Fitzwater Phone 281-840-4266
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser
Title Regulatory Compliance Advisor	Date 6/25/2012 Signature Mancy Fitywater
Acknowledgment of Transfer: The above request for transfer of injection at recorded in the records of the Kansas Corporation Commission. This acknowle does not convey any ownership interest in the above injection well(s) or pit perm	
is acknowledged as	is acknowledged as
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
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DISTRICTEPRNew Ope	PRODUCTIONUICUstrict
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Side Two Must Be Filed For All Wells

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KDOR Lease No.	: <u>207850</u>				
*Lease Name:	SCHMITZ, FRAN	K J *L	ocation: <u>3 27 3</u>	8 C NE	
Well No.	AP No. (YR DRLD/PRE '67)		m Section Line ot from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
2	150672014700	1320 FNL	1320 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.: 218455
☑ Gas Lease: No. of Gas**	Lease Name: SCHMITZ, FRANK J.
□ Gas Gathering System:	<u>- NW_</u> Sec_3_Twp <u>27S_</u> R_ <u>38W</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 3 27S 38W NW 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):
Number of injection wells	Injection Zone(s):
Field NameHUGOTON	
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 Phone281-366-7816 Date6/25/2012 Signature
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	Contact Person: Nancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature 7ttywater
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 permit	dgment of transfer pertains to Kansas Corporation Commission records only an
is acknowledged as 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	Date Authorized Signature
DISTRICTEPR	PRODUCTIONUICUICUICUICUIC
Mail to: Past Operator New Ope	30 S. Market - Room 2078, Wichita, Kansas 67202

Side Two Must Be Filed For All Wells

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KDOR Lease No.:	218455 	

*Lease Name:	SCHMITZ, FRAN	K.J*L	ocation: <u>3 27 3</u>	8 SE NW NW	
Well No.	AP No. (YR DRLD/PRE '67)		m Section Line et from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
3	150672083100 🗸	4034 FSL	4053 FEL	GAS	Producing
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797-28-28-28-28-28-28-28-28-28-28-28-28-28-		-			
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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.

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 Name: BP America Production Company Address 1: P.O. Box 3092 Address 2:	Well Location: Sec. 3 Twp. 27S R. 38W □ East ☑ West County:GRANT Lease Name:SCHMITZ, FRANK J 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, NW Sec. 3 27S 38W
urface Owner Information: ame: See Surface Owner Attachment ddress 1: ddress 2: ity: State: Zip:	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.
	(Cathodic Protection Borehole Intent), you must supply the surface owners se roads, tank batteries, pipelines, and electrical lines. The locations shown
the plat are preliminary non-binding estimates. The location y be submitted.	ns may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat
the plat are preliminary non-binding estimates. The location by be submitted. Sect one of the following: I certify that, pursuant to the Kansas Surface Owner No owner(s) of the land upon which the subject well is or wi	obtice Act (House Bill 2032), I have provided the following to the surface belief 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 are preliminary non-binding estimates. The location by be submitted. lect one of the following: I certify that, pursuant to the Kansas Surface Owner Not owner(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 the this form; and 3) my operator name, address, phone number I have not provided this information to the surface owner the KCC will be required to send this information to the surface.	obtice Act (House Bill 2032), I have provided the following to the surface belief 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 are preliminary non-binding estimates. The location ay be submitted. elect one of the following: I certify that, pursuant to the Kansas Surface Owner Not owner(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 the this form; and 3) my operator name, address, phone number I have not provided this information to the surface owner the KCC will be required to send this information to the strike 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.	obtice Act (House Bill 2032), I have provided the following to the surface belocated: 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 mber, fax, and email address. Per(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.
the plat are preliminary non-binding estimates. The location by be submitted. Ilect one of the following: I certify that, pursuant to the Kansas Surface Owner Not owner(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 the this form; and 3) my operator name, address, phone number 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 \$30.00 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.	otice Act (House Bill 2032), I have provided the following to the surface till 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 mber, fax, and email address. Ear(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. 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.
the plat are preliminary non-binding estimates. The location by be submitted. Ilect one of the following: I certify that, pursuant to the Kansas Surface Owner Note owner(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 the this form; and 3) my operator name, address, phone number I have not provided this information to the surface owner the KCC will be required to send this information to the surface owner 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, 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 and the associated Form C-1, Form CB-1, Form CB-1, Form CB-1 and CB-1 are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit that the statements made herein are true and continued the submit th	obtice Act (House Bill 2032), I have provided the following to the surface fill 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 mber, fax, 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. Der(s) handling fee with this form. If the fee is not received with this form, the form of T-1, or Form CP-1 will be returned.
in the plat are preliminary non-binding estimates. The location allowed by the submitted. I certify that, pursuant to the Kansas Surface Owner Not owner(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 the this form; and 3) my operator name, address, phone number the KCC will be required to send this information to the strike task, I acknowledge that I am being charged a \$30.00 choosing the second option, submit payment of the \$30.00 sonate the second option, submit payment of the \$30.00 sonate the second option. Sona-1 form and the associated Form C-1, Form CB-1, Form the second option is given by the second option. Signature of Operator or Against the submit payment of the \$30.00 sonates. Signature of Operator or Against the submit payment of the \$30.00 sonates. Signature of Operator or Against the submit payment of the \$30.00 sonates. Signature of Operator or Against the submit payment of the \$30.00 sonates. Signature of Operator or Against the submit payment of the \$30.00 sonates.	obtice Act (House Bill 2032), I have provided the following to the surface bill 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 mber, fax, 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. Defining fee with this form. If the fee is not received with this form, the in T-1, or Form CP-1 will be returned.

NEFF, VERNON M TRUST PO BOX 426 PO BOX 426 PO BOX 426		State	ZIP	Sec	Twp	Rng
	LAKIN	KS	09829	3	27	38W
	LAKIN	KS	67860	3	27	38W
REXROAT, RAMON D & NELDA J REV TR 913 COMANCHE CT	ULYSSES	KS	67880	3	22	38W

KCC WICHTA