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.

| Chec | k Applicable Boxes: | Effective Date of Transfer: July 1, 2012 |
|------------|--|---|
| - | Oil Lease: No. of Oil Wells** | KS Dept of Revenue Lease No.: 203537 |
| Ø (| Gas Lease: No. of Gas** | Lease Name: STEVENSON |
| | Gas Gathering System: | <u>NW_</u> Sec_23_Twp23S_R_33W_ □ E □ W |
| | Saltwater Disposal Well - Permit No.: | Legal Description of Lease: Sec. 23 23S 33W NW Qtr. |
| ; | Spot Location:feet from □ N / □ S Line | |
| | feet from □ E / □ W Line | |
| | Enhanced Recovery Project Permit No.: | County: FINNEY |
| 1 | Entire Project: ☐ Yes ☐ No | Production Zone(s): CHASE |
| | Number of injection wells | Injection Zone(s): |
| | Name HUGOTON | |
| | Sign of Mark St. Completed | vens vens |
| Surfa | ce Pit Permit No. | feet from □ N / □ S Line |
| Suria | (API No. if Drill Pit. WO or Haul) | feet from DE / DW Line |
| □Ту | pe of Pit: ☐ Emergency ☐ Burn ☐ Settling | ☐ Haul-Off ☐ Workover O 🔍 ☐ Drilling 🛱 🖽 |
| | Operator's License No. 5952 Exp la/36/12 Operator's Name & Address BP Anterica Production Company Box 3092, Houston, TX 77253 Regulatory Supervisor | Contact Person: Lou Barry Room 3.142B WL-1 Phone 281-366-7816 Date 6/25/2012 Signature RECEIVED |
| | Operator's License No. 33999 | Contact Person: Nancy Fitzwater JUL 0 3 2012 Phone 281-840-4266 |
| | Operator's Name & Address Linn Operating, Inc. | |
| | 00 Travis, Suite 5100 Houston, Texas 77002 | Oil/Gas Purchaser KCC WICHITA |
| Title | Regulatory Compliance Advisor | Signature Mancy Filtywater |
| the r | rded in the records of the Kansas Corporation Commission. This acknowled not convey any ownership interest in the above injection well(s) or pit permit is acknowledged as new operator and may continue to inject fluids as authorized by Permit 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 |
| DI | | PRODUCTION 8.7.12 UIC 8-7-13 |
| Ma | ail to: Past Operator New Oper | rator District |

Side Two Must Be Filed For All Wells

| KDOR Lease No.: | 203537 | Must be 1 | iled I OI All Well | 3 | |
|-----------------|-----------------------------|--------------------------------|--------------------|---------------------------------------|--------------------------------------|
| *Lease Name: | STEVENSON | *Location: _ | 23 23 33 SE S | SE NW | |
| Well No. 👢 | AP No. (YR DRLD/PRE '67) | Footage from (i.e. FS:L = Feet | | Type of Well (Oil/Gas/INJ/WSW) | Well Status (PROD/TA'S/Abandoned) |
| 1 | 150550036100/ | 2640 FSL | 2640 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.

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>23</u> Twp. <u>23S</u> R. <u>33W</u> □East ☑ West |
| Address 1: P.O. Box 3092 | County: FINNEY |
| Address 2: | Lease Name: STEVENSON 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 | NW Sec. 23 23S 33W |
| Surface Owner Information: Name: See Surface Owner Attachment | 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 |
| Address 1: | owner information can be found in the records of the register of deeds for the |
| Address 2: | county, and in the real estate property tax records of the county treasurer. |
| City: State: Zip: | |
| nd the KCC with a plat showing the predicted locations of leas n the plat are preliminary non-binding estimates. The locations | (Cathodic Protection Borehole Intent), you must supply the surface owners se roads, tank batteries, pipelines, and electrical lines. The locations shown s may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat |
| nd the KCC with a plat showing the predicted locations of leas In the plat are preliminary non-binding estimates. The locations | se roads, tank batteries, pipelines, and electrical lines. The locations shown s may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat |
| nd the KCC with a plat showing the predicted locations of leas in the plat are preliminary non-binding estimates. The locations hay be submitted. | se roads, tank batteries, pipelines, and electrical lines. The locations shown s may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat |
| and the KCC with a plat showing the predicted locations of least in the plat are preliminary non-binding estimates. The locations have 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 will | se roads, tank batteries, pipelines, and electrical lines. The locations shown is may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat RECEIV JUL 0 3 tice Act (House Bill 2032), I have provided the following to the surface if be located: 1) a copy of the Form C-1, Form CB-1, Form T-1 COMMUCIVE form being filed is a Form C-1 or Form CB-1, the plat(s) required by |
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| COLLIER, DENISE 5825 N VFW RD GARDEN CI COLLIER, DENISE 305 COUNTY ROAD 511 HEREFORD | ARDEN CITY | ζ, | 22000 | | |
|---|------------|-----|------------|----|----|
| 305 COUNTY ROAD 511 | | - | 6/846-9//1 | 23 | 23 |
| | HEREFORD | ス | 79045-7153 | 23 | 23 |
| SCHWEER, LYDIA TRUST 8343 DANBURY LN HUDSON | | FL | 34667-6527 | 23 | 23 |
| SCHWEER, MARK L 4575 N VFW RD GARDEN CI | ARDEN CITY | S | 67846-7007 | 23 | 23 |
| SCHWEER, MARK L 6315 N VFW RD GARDEN CI | ARDEN CITY | KS | 67846-9773 | 23 | 23 |
| CONSTANCE 1155 N ANDERSON RD G/ | ARDEN CITY | S | 67846-9701 | 23 | 23 |
| FAYE 4575 N VFW RD GA | ARDEN CITY | ĸs | 67846-7007 | 23 | 23 |
| FATZER, JOHN R TRUST 612 E 1ST AVE SAINT JOHI | SAINT JOHN | KS. | 67576-2224 | 23 | 23 |
| 4070 N VFW RD | ARDEN CITY | KS | 67846-7005 | 23 | 23 |
| CALDWELL, MARGARET K TRUST dated 9/30/08 P O BOX 2190 GARDEN CI | ARDEN CITY | S | 67846-2190 | 23 | 23 |

RECEIVED

JUL 0 3 2012

KCC WICHITA