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.: 206702
☑ Gas Lease: No. of Gas**	Lease Name: COLLINGWOOD F
☐ Gas Gathering System:	<u>E2 Sec 2 Twp 29S R 40W</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 2 29S 40W E2
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	in the second se
□ Enhanced Recovery Project Permit No.:	County: STANTON
Entire Project: ☐ Yes ☐ No	Production Zone(s):COUNCIL GROVE
Number of injection wells	Injection Zone(s):
Field Name PANOMA  ** Side Two Minds Be Consuleted.	H
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 □ D rilling
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	
Past Operator's License No. 5952 EXP 6/36/12 Past Operator's Name & Address BP America Production Company	Contact Person: Lou Barry Room 3.142B WL-1
Past Operator's Name & Address <u>BP America Production Company</u> P.O. Box 3092, Houston, TX 77253	Phone <u>281-366-7816</u> Date <u>6/25/2012</u>
Title Regulatory Supervisor	Signature Low Barry
	Contrat Bosses News City and
New Operator's License No. 33999 Linn Operating, Inc.	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
	Signature
Acknowledgment of Transfer: The above request for transfer of injection at recorded in the records of the Kansas Corporation Commission. This acknowledges not convey any ownership interest in the above injection well(s) or pit permitted.	adgment 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.:
	_
Date	DateAuthorized Signature
Authorized Signature	Authorized digitations
DISTRICTEPR	PRODUCTION 9 · 2.6 · 12. UIC to
	130 S. Market - Room 2078, Wichita, Kansas 67202

### Side Two Must Be Filed For All Wells

KDOR Lease No	.: <u>206702</u>				
*Lease Name:	COLLINGWOOD	<u>F</u> *Loc	ation: <u>2 29 40 (</u>	C W2 E2	
Well No.	AP No. (YR DRLD/PRE '67)		m Section Line It from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
2	151872026600 /	2540 FSL	1980 FEL	GAS	Producing
			·		
				-	
			-		

A separate sheet may be attached if necessary, in the second

<sup>\*</sup>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
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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.: 200606
☑ Gas Lease: No. of Gas**	Lease Name: COLLINGWOOD F
□ Gas Gathering System:	<u>- NE</u> Sec_2_Twp29S_R_40W_□ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 2 29S 40W NE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from 🗆 E / 🗆 W Line	
☐ Enhanced Recovery Project Permit No.:	County: STANTON
Entire Project: ☐ Yes ☐ No	Production Zone(s): CHASE
Number of injection wells	Injection Zone(s):
Field Name HUGOTON ** Side Two Mass So 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 Phone281-366-7816 Date6/25/2012 Signature
New Operator's License No33999  New Operator's Name & Address Linn Operating, Inc	Contact Person: Nancy Fitzwater Phone 281-840-4266 Oll/Gas Purchaser Date 6/25/2012 Signature 7tancy 7itywater
Acknowledgment of Transfer: The above request for transfer of injection autrecorded 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
DateAuthorized Signature	Date  Authorized Signature  PRODUCTION UIC District  30 S. Market - Room 2078, Wichita, Kansas 67202
	PRODUCTIONUICUCUIC
Mail to: Past Operator New Operator	30 S. Market - Room 2078, Wichita, Kansas 67202

# Side Two Must Be Filed For All Wells

KDOR Lease No.	200606				
*Lease Name:	COLLINGWOOD	<u>F</u> *Loc	ation: <u>2 29 40 </u>	SW NE	
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)
1	151870021300 /	2640 FSL	2640 FEL	GAS	Producing

A separate sheet may be attached if necessary.

<sup>\*</sup>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.: 225219
☑ Gas Lease: No. of Gas**	Lease Name: COLLINGWOOD F
□ Gas Gathering System:	<u>- NE_</u> Sec_2_Twp <u>29S_R40W</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 2 29S 40W NE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	
☐ Enhanced Recovery Project Permit No.:	County: STANTON
Entire Project: ☐ Yes ☐ No	Production Zone(s):
Number of injection wells	Injection Zone(s):
Field Name HUGOTON Side Two Miles & Completes.	
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 No5952  Past Operator's Name & Address	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 Signature
New Operator's License No33999  New Operator's Name & Address Linn Operating, Inc	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 permi	dgment of transfer pertains to Kansas Corporation Commission records only ar
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	PRODUCTIONUIC
DISTRICTEPR	PRODUCTIONUICKO 03
Mail to: Past Operator New Ope	prator District 20

### Side Two Must Be Filed For All Wells

	$\boldsymbol{\nu}$	
KDOR Lease No.:	225219	

*Lease Name:	COLLINGWOOD F	*Locati	on: <u>2 29 40 N</u>	NE NE NE	
Well No.	AP No. (YR DRLD/PRE '67)	Footage from (i.e. FS:L = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
3	151872101400 /	330 FNL	330 FEL	GAS	Producing
			***************************************		
VI 1 - 41 - 11 - 11 - 11 - 11 - 11 - 11 -					
	*****				

A separate sheet may be attached if necessary.

<sup>\*</sup>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.

Email Address:smyerscd@bp.com	DPERATOR: License #5952  Name: BP America Production Company	Well Location:Sec. 2 Twp. 29S R. 40W □East ☑ West
City: Houston State: Texas Zip: 77253 Contact Person: DeAnn Smyers Deann Deann Smyers Deann Smye		
Phone: (281) 366-4395 Fax: (281) 366-7836 If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:  E2, NE Sec. 2 29S 40W  Surface Owner Information:  Name: See Surface Owner Attachment sheet listing all of the information to the left for each surface owner. Surface owner 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:  This form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners of the KCC with a plat showing the predicted locations of lease reads, tank batteries, pipelines, and electrical lines. The locations shown the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat and be submitted.  It filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:  E2, NE Sec. 2 29S 40W  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 to the surface owner, and in the real estate property tax records of the county treasurer.  It have not provided this information to the surface owner(s). In acknowledge that, provided this information, the KCC will be required to send this information to the surface owner(s). In acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). In omitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form, the SONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.		
### description of the lease below:  ### E2, NE Sec. 2 29S 40W  ### Surface Owner Information:    Name: See Surface Owner Attachment	•	
Surface Owner Information:    See Surface Owner Attachment		If filing a Form T-1 for multiple wells on a lease, enter the legal
Surface Owner Information:    See Surface Owner Attachment   See Surface Owner Information to the left for each surface owner. Surface Owner information can be found in the records of the register of deeds for the Address 2:	:mail Address:smyerscowop.com	description of the lease below:
Name: See Surface Owner Attachment sheet listing all of the information to the left for each surface owner. Surface Address 1:		E2, NE Sec. 2 29S 40W
See Surface Owner Attachment Address 1:	Surface Owner Information	When filing a Form T-1 involving multiple surface owners, attach an additional
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	I certify that, pursuant to the Kansas Surface Owner No owner(s) of the land upon which the subject well is or wi CP-1 that I am filing in connection with this form; 2) if the this form; and 3) my operator name, address, phone nuture.  I have not provided this information to the surface owner the KCC will be required to send this information to the	ill 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.  er(s). I acknowledge that, because I have not provided this information, surface owner(s). To mitigate the additional cost of the KCC performing
Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202	☐ I certify that, pursuant to the Kansas Surface Owner No 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 nuture.  ☐ 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.	ill 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.  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.  O handling fee with this form. If the fee is not received with this form, the
Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202	I certify that, pursuant to the Kansas Surface Owner No 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 associated Form C-1, Form CB-1, Form	ill 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.  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.  O 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.
<b>4</b> .	I certify that, pursuant to the Kansas Surface Owner No 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 associated Form C-1, Form CB-1, Form CB-1 form and the associated Form C-1, Form CB-1, Form CB-1 form and the statements made herein are true and continued the statem	ill 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.  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.  O 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.

Name	Address1	Address2	City	State	ZIP	Sec	Twp	Rng
FREEDOM FARMS INC	BOX 619		NOSNHOR	KS	67855-0619	2	59	40W
FAHRENKROG, DONALD & MARIA & PRICE, JANIS REV TST	4990 EIDER LN		LAS CRUCES	NM	88007	2	59	40W
KENDRICK, GARY E REV TRUST ETAL	BOX 40		NOSNHOI	KS	67855-0040	2	59	40W
H & C FARMS INC	BOX 914		NOSNHO	KS	67855-0914	2	59	40W

