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.: 220136
☑ Gas Lease: No. of Gas**	Lease Name: GOOD
☐ Gas Gathering System:	
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 28 31S 33W NE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	2
☐ Enhanced Recovery Project Permit No.:	County: SEWARD
Entire Project:	Production Zone(s): CHASE
Number of injection wells	Injection Zone(s):
Field NameHUGOTON *** Side Two Must Be Completed.	
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul) Type of Pit: Emergency Burn Settling	feet from \square N / \square S Line feet from \square E / \square W Line \square Haul-Off \square Workover \square \square Drilling
Past Operator's License No. 5952 Exp U/30/12 Past Operator's Name & Address BP America Production Company P.O. Box 3092, Houston, TX 77253 Title Regulatory Supervisor	Contact Person: Lou Barry Room 3.142B WL-1 Phone 281-366-7816 Date 6/25/2012 Signature Lou Barry RECEIVED
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 JUL 0 2 2012 Oil/Gas Purchaser Date 6/25/2012 KCC WICHITA
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 perm	adgment 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.:
DateAuthorized Signature	Date Authorized Signature
DISTRICTEPR//New Ope	PRODUCTION

Side Two Must Be Filed For All Wells

M

KDOR Lease No.:	220136		-		
*Lease Name:	GOOD	*Location:	28 31 33 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)
2HI	151752143900	3730 FSL	1250 FEL	GAS	Producing
		_			
,	. ·		_		
		-			
		-			
			_		
					uancaum.
		-			

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.: 201377			
☑ Gas Lease: No. of Gas**	Lease Name: GOOD			
□ Gas Gathering System:	<u>- SW_</u> Sec_28_Twp31S_R_33W_□ E □ W			
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 28 31S 33W SW Qtr.			
Spot Location:feet from □ N / □ S Line				
feet from 🗆 E / 🗆 W Line				
☐ Enhanced Recovery Project Permit No.:	County:SEWARD			
Entire Project: ☐ Yes ☐ No	Production Zone(s):			
Number of injection wells	Injection Zone(s):			
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	feet from \square N / \square S Line feet from \square E / \square W Line Haul-Off \square Workover \square Drilling			
Past Operator's License No. 5952 Past Operator's Name & Address BP America Production Company P.O. Box 3092, Houston, TX 77253 Title Regulatory Supervisor	Contact Person:			
New Operator's License No. 33999	Contact Person: Nancy Fitzwater JUL 0 2 2012			
New Operator's Name & Address Linn Operating, Inc.	Phone 281-840-4266			
600 Travis, Suite 5100 Houston, Texas 77002	Phone <u>281-840-4266</u> Oil/Gas Purchaser			
Title Regulatory Compliance Advisor	Signature Mancy Fitzwater			
	is acknowledged as			
Date	Date			
Authorized Signature	Authorized Signature			
DISTRICTEPR	PRODUCTIONUIC			
Mail to: Past Operator New Op	erator District			

Side Two Must Be Filed For All Wells

KDOR Lease No.:	201377		_		
*Lease Name:	GOOD	_ *Location:	28 31 33 NE NE SW		
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)
1	151750049100	2490 FSL	2790 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. <u>28</u> Twp. <u>31S</u> R. <u>33W</u> □East ☑ West
Address 1: P.O. Box 3092	County: SEWARD
Address 2:	Lease Name: GOOD Well #:
City: Houston State: Texas Zip: 77253	
Contact Person: DeAnn Smyers	16 411 Farm T d dan markhala walla an a lana ankan dha lanal
Phone: (281) 366-4395 Fax: (281) 366-7836	If filling a Form T-1 for multiple wells on a lease, enter the legal
Email Address: smyerscd@bp.com	description of the lease below:
	NE, SW Sec. 28 31S 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:	
	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 separate plat
on the plat are preliminary non-binding estimates. The locati	
on the plat are preliminary non-binding estimates. The locati may be submitted.	ions may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat RECEIVED
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 (where (s) of the land upon which the subject well is or	Notice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or FORCE WICHITA
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 roughly 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 surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or FORCE WICHITA
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 own the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$3 of the choosing the second option, submit payment of the \$30.	RECEIVED Notice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or fit the form being filed is a Form C-1 or Form CB-1, the plat(s) required C WICHIT/number, fax, and email address. Viner(s). 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, the
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 reached 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 surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CB-1, the plat(s) required C WICHIT/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. If the fee is not received with this form, the form T-1, or Form CP-1 will be returned.

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

	WITHERS, CHARLES & CAROLYN; PANKARATZ, GRETCHEN GOOD 6655 LAMAR RD	KU ENDOWMENT ASSOCIATION PO BOX 913	IVES, DEAN & MARILOU PO BOX 785	Name Address1	
				Address2	
	Reno	HUTCHINSON	Satanta	City	
Ά	TX	ĸs	S	State	
	75462-7110	67504-0913	67870-0785	ZIP	
	28	28	28	Sec	
	31	31	31	Twp	
	33W	33W	33W	Rng	

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KCC WICHITA