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.: 201379
☑ Gas Lease: No. of Gas**	Lease Name: <u>GREEN, R.L.</u>
□ Gas Gathering System:	<u>NE</u> Sec_13_Twp24S_R_37W_□ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 13 24S 37W NE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	
☐ Enhanced Recovery Project Permit No.:	County: KEARNY
Entire Project: ☐ Yes ☐ No	Production Zone(s): CHASE
Number of injection wells	Injection Zone(s):
Field Name HUGOTON	the H
** Side Two Must Be Completed.	TO TO
Surface Pit Permit No.	feet from □ N / □ S Line
(API No. if Drill Pit. WO or Haul)	feet from $\square$ E / $\square$ W Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	□ Haul-Off □ Workover O R □ Drilling
Past Operator's License No. 5952 Exp 6/35/12 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 Phone281-366-7816 Date6/25/2012 Signature
New Onested Henry New 20000	Contact Person: Nancy Fitzwater JUL 0 3 2012
New Operator's License No. 33999 New Operator's Name & Address Linn Operating, Inc.	Phone 281-840-4266
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas PurchaserKCC W/CLITA
Title Regulatory Compliance Advisor	Date 6/25/2012  Signature Mancy Titywater
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	edgment of transfer pertains to Kansas Corporation Commission records only an
DISTRICT EPR 8/13/12	PRODUCTION 8.14.12uic 8-14-13
Mail to: Past Operator New Operator	erator District

### Side Two Must Be Filed For All Wells

KDOR Lease No	.: <u>201379</u>				
*Lease Name:	GREEN, R.L.	*Location: _	13 24 37 SE S	W SW NE	
Well No.	AP No. (YR DRLD/PRE '67)	Footage from (i.e. FS:L = Feet	Section Line	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	150930064700 /	2740 FNL	2240 FEL	GAS	Producing
					·
7 No. 1 at 22 admin					
	-				
				***************************************	
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				1	
•					
	MANAGEMENT OF THE PROPERTY OF		440.		

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.

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# 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, 2	012
☐ Oil Lease: No. of Oil Wells**	KS Dept of Revenu	ue Lease No.:2	<u>07600</u> <b>√</b>
☑ Gas Lease: No. of Gas**	Lease Name: G	GREEN, R.L.	
☐ Gas Gathering System:	<u>- SE_</u> Sec	: 13_Twp_ 24S_R _37W_	O E O W
□ Saltwater Disposal Well - Permit No.:	Legal Description of	of Lease: <u>Sec. 13 24S 3</u>	7W SE Qtr.
Spot Location:feet from □ N / □ S Line			
feet from $\square$ E / $\square$ W Line			
☐ Enhanced Recovery Project Permit No.:	County: KE	ARNY	
Entire Project: ☐ Yes ☐ No	Production Zone(s	s): COUNCIL G	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)  □ Type of Pit: □ Emergency □ Burn □ Settling	 ☐ Haul-Off	feet from □ N / □ S Line feet from □ E / □ W Line □ Workover □ Dr	
Past Operator's License No. <u>5952</u> Past Operator's Name & Address <u>BP America Production Compa</u> P.O. Box 3092, Houston, TX 77253  Title <u>Regulatory Supervisor</u>	Phone <u>281-366</u> Date <u>6/25/201</u>	12 Panna	
New Operator's License No. 33999  New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	Contact Person: Phone281-840 Oil/Gas Purchaser Date6/25/2012	Nancy Fitzwater )-4266 r	FECEIVED  JUL 0 3 2012  KCC WICHITA
Title Regulatory Compliance Advisor	Signature	Nancy Fitzwat	er
Acknowledgment of Transfer: The above request for transfer of inj recorded in the records of the Kansas Corporation Commission. This a does not convey any ownership interest in the above injection well(s) or is acknowled the new operator and may continue to inject fluids as authorized by No.: Recommended action	acknowledgment of transfer pertarnit.	ains to Kansas Corporation	Commission records only an is acknowledged as
Date	Date		
Authorized Signature		Authorized	Signature
DISTRICTEPR	PRODUCTIONNew Operator	UIC District	

### Side Two Must Be Filed For All Wells

KDOR Lease No.:	207600 V				
*Lease Name:	GREEN, R.L.	*Location: _	13 24 37 C SE		
Well No. 5.	AP No. (YR DRLD/PRE '67)	Footage from (i.e. FS:L = Feet f		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
2	150932027200/	1320 FSL	1320 FEL	GAS	Producing
77.00					
		-			
· ·					
100000					
	<del>-</del>				

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.: 216995
☑ Gas Lease: No. of Gas**	Lease Name: GREEN, R.L.
□ Gas Gathering System:	<u>- SW_Sec_13_Twp24S_R_37W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 13 24S 37W SW Qtr.
Spot Location:feet from □ N / □ S Line	
feet from $\square$ E / $\square$ W Line	
□ Enhanced Recovery Project Permit No.:	County
, ,	County: KEARNY
Entire Project: ☐ Yes ☐ No	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 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: Lou Barry Room 3.142B WL-1 Phone 281-366-7816 Date 6/25/2012  Signature Lou Barry Room 3.142B WL-1  Signature 1807-1808
New Operator's License No. 22000	Contact Person: Nancy Fitzwater Phone 281-840-4266 Oli/Gas Purchaser JUL 0 3 2012 Date 6/25/2012
New Operator's License No. 33999  New Operator's Name & Address Linn Operating, Inc.	Phone 281-840-4266
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser
Title Regulatory Compliance Advisor	Signature Nancy Fitzwater KCC WICHITA
	is acknowledged as
No.: Recommended action	permitted by No.:
Date Authorized Signature	Date Authorized Signature
DISTRICTEPR	PRODUCTIONUIC
Mail to: Past Operator New Op	perator District

### Side Two Must Be Filed For All Wells

KDOR Lease No.	.: <u>216995</u>		•		
*Lease Name:	GREEN, R.L.	*Location:	13 24 37 NE S	SW SW	
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)
3	150932107500	1250 FSL	3998 FEL	GAS	Producing
			· · · · · · · · · · · · · · · · · · ·		
				***************************************	
1 - 7 - 7 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2			***************************************		

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.

Select the corresponding form being filed: C-1 (Intent) CE	3-1 (Cathodic Protection Borehole Intent)  T-1 (Transfer)  CP-1 (Plugging Application)
OPERATOR: License #         5952           Name:         BP America Production Company           Address 1:         P.O. Box 3092           Address 2:	Well Location:Sec. 13 Twp. 24S R. 37W □East ☑ West County: KEARNY Lease Name: GREEN, R.L. Well #:  If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Surface Owner Information:  Name: See Surface Owner Attachment	NE, SE, SW Sec. 13 24S 37W  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: Address 2: City: State: Zip:	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.
	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
☐ I certify that, pursuant to the Kansas Surface Owner No owner(s) of the land upon which the subject well is or wi	Ditice Act (House Bill 2032), I have provided the following to the surface II be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CB-1 in the plat(s) required by mber, fax, and email address.
the KCC will be required to send this information to the	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.
If choosing the second option, submit payment of the \$30.00 KSONA-1 form and the associated Form C-1, Form CB-1, Form	O handling fee with this form. If the fee is not received with this form, the T-1, or Form CP-1 will be returned.
I hereby certify that the statements made herein are true and co	orrect to the best of my knowledge and belief.
Date: June 25, 2012 Signature of Operator or Ag	ent: Lou Barry Title: Regulatory Supervisor

Name	Address1	Address2	City	State	ZIP	Sec	Twp	Rng
CALDWELL, MARGARET K TRUST	PO BOX 2190		GARDEN CITY	KS	67846	13	24	37W

RECEIVED
JUL 0 3 2012
KCC WICHITA