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.

□ Oil Lease: No. of Oil Wells □ Gas Lease: No. of Gas □ 1	Check Applicable Boxes:	Effective Date of Transfer: July 1, 2012
Gas Castes No. of Cas Castes No. of Cas Castes No. of Castes Cas	☐ Oil Lease: No. of Oil Wells**	KS Dept of Revenue Lease No.: 201645
□ Saltwater Disposal Well - Permit No.: Spot Location:feet from □ N / □ S Line	☑ Gas Lease: No. of Gas**	Lease Name: HICKOK, J.R. "F"
□ Saltwater Disposal Well - Permit No: Spot Location:feet from □ N / □ S Linefeet from □ E / □ W Line □ feet from □ E / □ W Line □ feet from □ E / □ W Line □ feet from □ E / □ W Line □ feet from □ E / □ W Line □ Type of Disposal Well - Permit No: □ Type of Pit: □ Emergency □ Burn □ Settling □ Type of Pit: □ Emergency □ Disling □ Type of Pit: □ Disling □ Type of Pit: □ Type of Pit: □ Disling □ Type of Pit: □ Type of Pit: □ Disling □ Type of Pit: □ Type of Pit: □ Type of Pit: □ Type of Pit:	□ Gas Gathering System:	<u>SE_Sec_1_Twp30S_R_38W_</u> □ E □ W
	□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 1 30S 38W SE Qtr.
Enhanced Recovery Project Permit No: Entire Project: Yes No Production Zone(s): CHASE Entire Project: Yes No Production Zone(s): CHASE Entire Project: Yes Mumber of Injection wells Injection Zone(s): Injection Zone(s): CHASE Entire Project: Yes Mumber of Injection wells Injection Zone(s): Injection Z	Spot Location:feet from □ N / □ S Line	,×
Entire Project: Yes No Number of injection wells Field Name HUGOTON **Side Two Must Be Completed.* Surface Pit Permit No. feet from N / S Line feet from D / S	feet from □ E / □ W Line	
Production Zone(s):	☐ Enhanced Recovery Project Permit No.:	County:*
Number of Injection Wells	Entire Project: ☐ Yes ☐ No	
Surface Pit Permit No. API No. if Drill Pit. WO or Haul Type of Pit: Emergency Burn Settling Haul-Off Workover Uniting Past Operator's License No. 5952 Exp (e/30/1/2 Past Operator's Name & Address BP Arrierica Production Company Po. Box 3092. Houston. TX 77253 Title Regulatory Supervisor Regulatory Supervisor New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston. Texas 77002 Title Regulatory Compliance Advisor Title Regulatory Compliance Advisor Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Wancy Fitzwater Signature Wancy Fitzwater	Number of injection wells	
Contact Person: Lou Barry Room 3.1428 WL-1	Field Name HUGOTON ** Side Two Must Be Completed.	
Past Operator's License No. 5952 FAP (a/50/12) Past Operator's Name & Address BP America Production Company P.O. Box 3092. Houston. TX 77253 Title Regulatory Supervisor New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002 Title Regulatory Compliance Advisor Title Regulatory Supervisor Total Reservatory Reveals WL-1 Phone 281-366-7816 Date 6/25/2012 Title Regulatory Fitzwater Phone 281-840-4266 Dil'Gas Purchaser Date 6/25/2012 Title Regulatory Title Regulatory Reveals		feet from \square E / \square W Line
Past Operator's Name & Address BP America Production Company P.O. Box 3092. Houston. TX 77253 Title Regulatory Supervisor 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 Title Regulatory Compliance Advisor Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit. Signature Stancy Fitzwater Phone 281-840-4266 Oil/Cas Purchaser Date 6/25/2012	☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	☐ Haul-Off ☐ Workover ☐ ☐ Drilling
New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002 Title Regulatory Compliance Advisor Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit. Signature Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Phone 281-840-4266 Oil/Gas Purchaser D	Past Operator's Name & AddressBP America Production Company P.O. Box 3092, Houston, TX 77253 TitleRegulatory Supervisor	Phone <u>281-366-7816</u> Date <u>6/25/2012</u> Signature <u>Low Barry</u>
Title Regulatory Compliance Advisor Date 6/25/2012	New Operator's Name & Address Linn Operating, Inc.	
recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.		Date <u>6/25/2012</u>
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action Porton Date The new operator of the above named lease containing the surface pit permitted by No.: The new operator of the above named lease containing the surface pit permitted by No.:	recorded in the records of the Kansas Corporation Commission. This acknowledges	wledgment of transfer pertains to Kansas Corporation Commission records only and
Date Authorized Signature Authorized Signature Authorized Signature PRODUCTION 9.21.12 UIC 9-21-12 UIC 9-21-12 VIC New Operator District New Operator District	the new operator and may continue to inject fluids as authorized by Pern	the new operator of the above named lease containing the surface pit
DISTRICT EPR 9/20/12 PRODUCTION 9.21.12 UIC Y-21-12 Mail to: Past Operator District New Operator District		DateAuthorized Signature
Mail to: Past Operator		PRODUCTION 9.21.12 UIC 7-21-12 VIL PIETRICE
		Operator

Side Two Must Be Filed For All Wells

KDOR Lease No.	.: <u>201645</u>				
*Lease Name:	HICKOK, J.R. "F"	*Location	on: <u>1 30 38 SE</u>		
Well No.	AP No. (YR DRLD/PRE '67)		Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	150670058900 /	2490 FSL	2490 FEL	GAS	Producing
					<u></u>
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	-				
	·		 		

A separate sheet may be attached if necessary, $i=1,\dots, \infty$

^{*}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.

Mail to: KCC - Conservation Division, 1	30 S. Market - Room 2078, Wichita, Kansas 67202
Mail to: Past Operator New Ope	erator District
Date Authorized Signature EPR	PRODUCTIONUICUISTINCT
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.:
is acknowledged as	is acknowledged as
Acknowledgment of Transfer: The above request for transfer of injection are 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
Title Regulatory Compliance Advisor	Signature Nancy Fitzwater
New Operator's License No. 33999 New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	Contact Person: Nancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012
Title Regulatory Supervisor	Signature Lou Barry
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	Contact Person:Lou Barry Room 3.142B WL-1 Phone281-366-7816 Date6/25/2012
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
Field NamePANOMA	
Number of injection wells	Injection Zone(s):
Entire Project: ☐ Yes ☐ No	Production Zone(s): COUNCIL GROVE
☐ Enhanced Recovery Project Permit No.:	County: GRANT
feet from \square E / \square W Line	
Spot Location:feet from □ N / □ S Line	
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 1 30S 38W NE Qtr.
☐ Gas Gathering System:	<u>NE_</u> Sec_1_Twp <u>30S_</u> R_ <u>_38W_</u> □E□W
☑ Gas Lease: No. of Gas**	Lease Name: <u>HICKOK, J.R.</u> "F"
Oil Lease: No. of Oil Wells**	KS Dept of Revenue Lease No.: 218586
Check Applicable Boxes:	Effective Date of Transfer: July 1, 2012

Side Two Must Be Filed For All Wells

		12th	wiust be
KDOR Lease No.:	218586	V	

NDON LOASO NO	210000				
*Lease Name:	HICKOK, J.R. "F"	*Locatio	n: <u>1 30 38 NE</u>	_	
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)
2X	150672111300 /	4026 FSL	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

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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, 2012
□ Oil Lease: No. of Oil Wells**	KS Dept of Revenue Lease No.: 218444
☑ Gas Lease: No. of Gas**	Lease Name: HICKOK, J.R. "F"
Gas Gathering System:	<u>-NE</u> Sec_1_Twp <u>_30S_R_38W</u> _□ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 1 30S 38W NE 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): 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 □ N / □ S Line feet from □ E / □ W Line □ 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	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 7ancy 7itzwater
	uthorization, surface pit permit #has been noted, approved and duly dgment of transfer pertains to Kansas Corporation Commission records only and it.
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	PRODUCTION UIC District Poor 2079 Wighits Kappage 57703
DISTRICTEPR	PRODUCTIONUIC
Mail to: Past Operator New Ope	30 S. Market - Room 2078, Wichita, Kansas, 67202

Side Two Must Be Filed For All Wells

KDOR Lease No.	: 218444				
*Lease Name:	HICKOK, J.R. "F"	*Locat	tion: <u>1 30 38 NE</u>		
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	150672079200 /	4030 FSL	1250 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 Name: BP America Production Company Address 1: P.O. Box 3092	Well Location:Sec. 1_Twp. 30S_R. 38W_□East ☑ West County:GRANT
Address 2:	Lease Name: HICKOK, J.R. "F" Well #:
City: Houston State: Texas Zip: 77253	
Contact Person: DeAnn Smyers Phase (201) 255 425 Few (201) 255 7925	If filing a Form T-1 for multiple wells on a lease, enter the legal
Phone: (281) 366-4395 Fax: (281) 366-7836 Email Address: smyerscd@bp.com	description of the lease below:
Email Address. <u>Smyclodd Sp.com</u>	NE, SE Sec. 1 30S 38W
Surface Owner Information:	When filing a Form T-1 involving multiple surface owners, attach an additional
Name: See Surface Owner Attachment	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:	
•	Netice Act (House Bill 2022). I have provided the following to the surface
I certify that, pursuant to the Kansas Surface Owner I owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if	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 if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by number, fax, and email address.
 ✓ I certify that, pursuant to the Kansas Surface Owner is owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone n ✓ I have not provided this information to the surface ow the KCC will be required to send this information to the 	will 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
owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone n 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 \$30	will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by number, fax, and email address. Inter(s). I acknowledge that, because I have not provided this information, e surface owner(s). To mitigate the additional cost of the KCC performing 0.00 handling fee, payable to the KCC, which is enclosed with this form.
 ☑ I certify that, pursuant to the Kansas Surface Owner I owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone n ☐ 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 \$30 choosing the second option, submit payment of the \$30. ☐ Choosing the second option, submit payment of the \$30. ☐ CONA-1 form and the associated Form C-1, Form CB-1, Form 	will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by number, fax, and email address. Iner(s). I acknowledge that, because I have not provided this information, e surface owner(s). To mitigate the additional cost of the KCC performing 0.00 handling fee, payable to the KCC, which is enclosed with this form. On handling fee with this form. If the fee is not received with this form, the rm T-1, or Form CP-1 will be returned.
 ✓ I certify that, pursuant to the Kansas Surface Owner is owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone in 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 \$30. If choosing the second option, submit payment of the \$30. ISONA-1 form and the associated Form C-1, Form CB-1, Form CB-1,	will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by number, fax, and email address. Iner(s). I acknowledge that, because I have not provided this information, e surface owner(s). To mitigate the additional cost of the KCC performing 0.00 handling fee, payable to the KCC, which is enclosed with this form. On handling fee with this form. If the fee is not received with this form, the rm T-1, or Form CP-1 will be returned.

Surface Owner Attachment

Name	Address1	Address2	City	State	ZIP	Sec	Τwp	Rng
SPAR, REBECCA KAY & BEAMAN, BERNICE LOVELLA	8 REIGATE PL		SUFFREN	Ν	10901	1	30	38W
YOUNG, NANCY K	PO BOX 847		ULYSSES	KS	67880	1	30	38W
KEPLEY, MARSHALL E & ROBERTA F REV TR	1205 S ADAMS		HUGOTON	KS	67951	1	30	38W

KCC WICHITA