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.: 202026 |
| ☑ Gas Lease: No. of Gas** | KS Dept of Revenue Lease No.: 202026 |
| ☐ Gas Gathering System: | NE Soc 2 Two 30S R 30W DEDW |
| □ Saltwater Disposal Well - Permit No∴ | Legal Description of Lease: Sec. 2 30S 39W NE Qtr. |
| ✓ Spot Location: feet from □ N / □ S Line | P. |
| feet from □ E / □ W Line | |
| □ Enhanced Recovery Project Permit No.: | County: STANTON |
| | H. |
| Entire Project: ☐ Yes ☐ No | Production Zone(s): CHASE |
| Number of injection wells | Injection Zone(s): |
| Field Name HUGOTON ** Side TV6 Most Be Campleted. | |
| Surface Pit Permit No. | feet from □ N / □ S Line |
| (API No. if Drill Pit. WO or Haul) | feet from □ E / □ W Line |
| ☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling | □ Haul-Off □ Workover ◯ 🗨 □ Drilling |
| Past Operator's License No. 5952 Exp (4/30/R) 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 |
| New Operator's Name & Address Linn Operating, Inc. | Phone <u>281-840-4266</u> |
| 600 Travis, Suite 5100 Houston, Texas 77002 | Oil/Gas Purchaser Date 6/25/2012 |
| Title Regulatory Compliance Advisor | Signature Nancy Fitywater |
| 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 permit is acknowledged as the new operator and may continue to inject fluids as authorized by Permit | dgment of transfer pertains to Kansas Corporation Commission records only and |
| No.: Recommended action | permitted by No.: |
| Date Authorized Signature | PRODUCTION 9.26.12 UIC 9-24-12 Pistrict |
| DISTRICT | PRODUCTION 9.26.12 UIC 9-24-13 CM/Chus |

Side Two Must Be Filed For All Wells

KDOR Lease No.: __ 202026 *Lease Name: _ JULIAN D *Location: 2 30 39 NE Well No. AP No. Footage from Section Line Type of Well Well Status (YR DRLD/PRE '67) (i.e. FS:L = Feet from South Line) (Oil/Gas/INJ/WSW) (PROD/TA'S/Abandoned) 151870037800 √ 2740 FSL 2540 FEL 1 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.

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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.: 218037 |
| ☑ Gas Lease: No. of Gas** | Lease Name: JULIAN D |
| ☐ Gas Gathering System: | <u>NE_</u> Sec_2_Twp <u>30S_R39W_</u> □ E □ W |
| □ Saltwater Disposal Well - Permit No.: | Legal Description of Lease: Sec. 2 30S 39W NE Qtr. |
| Spot Location:feet from □ N / □ S Line | |
| feet from \square E / \square 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 Missis 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. 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 Phone281-366-7816 Date6/25/2012 Signature |
| New Operator's License No33999 New Operator's Name & AddressLinn Operating, Inc600 Travis, Suite 5100 Houston, Texas 77002 TitleRegulatory Compliance Advisor | Contact Person: Nancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Tancy Fitzwater |
| Acknowledgment of Transfer: The above request for transfer of injection au 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 | 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 |
| D-1- | Date Authorized Signature PRODUCTION UIC District JOS S. Market - Room 2078, Wichita, Kansas 67202 |
| Date Authorized Signature | Date Authorized Signature |
| DISTRICTEPR | PRODUCTIONUICUICUICUIC |
| Mail to: Past Operator New Ope | eratorDistrict |
| Mail to: KCC - Conservation Division, 1 | 30 S. Market - Room 2078, Wichita, Kansas 67202 |

Side Two Must Be Filed For All Wells

| KDOR Lease No.: | 218037 | | | | |
|-----------------|-----------------------------|-------------|------------------------------------|-----------------------------------|---------------------------------------|
| *Lease Name: | | *Location: | 2 30 39 SW NE N | F | |
| Well No. | AP No. (YR DRLD/PRE '67) | Footage fro | m Section Line at from South Line) | Type of Well (Oil/Gas/INJ/WSW) | Well Status (PROD/TA'S/Abandoned) |
| 3НІ | 151872061700 / | 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.

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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.: 206849 |
| ☑ Gas Lease: No. of Gas** | Lease Name: <u>JULIAN D</u> |
| □ Gas Gathering System: | <u>- N2_</u> Sec_2_Twp <u>30S_</u> R_ <u>_39W_</u> □ E □ W |
| □ Saltwater Disposal Well - Permit No.: | Legal Description of Lease: Sec. 2 30S 39W N2 |
| 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):COUNCIL GROVE |
| Number of injection wells | Injection Zone(s): |
| Field Name PANOMA ** Side Two Must Be Completed | |
| 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 □ Drilling |
| Past Operator's License No. <u>5952</u> Past Operator's Name & Address <u>BP America Production Company</u> | Contact Person: Lou Barry Room 3.142B WL-1 Phone 281-366-7816 |
| P.O. Box 3092, Houston, TX 77253 | Date6/25/2012 |
| Title Regulatory Supervisor | Signature Lou Barry |
| New Operator's License No. 33999 New Operator's Name & Address Linn Operating, Inc. | Contact Person: Nancy Fitzwater Phone 281-840-4266 |
| 600 Travis, Suite 5100 Houston, Texas 77002 | Oil/Gas Purchaser Date6/25/2012 |
| Title Regulatory Compliance Advisor | Signature Nancy Fitzwaler |
| Acknowledgment of Transfer: The above request for transfer of injection at recorded in the records of the Kansas Corporation Commission. This acknowle does not convey any ownership interest in the above injection well(s) or pit perm | |
| 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 | PRODUCTIONUICDistrictDistrict |
| Authorized Signature | Authorized Signature |
| DISTRICTEPR | PRODUCTIONUICON |
| Mail to: Past Operator New Ope | erator District |

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

ls

| | Side I WO |
|----|----------------------------|
| A. | Must Be Filed For All Well |

| KDOR Lease No. | :206849 | | | | |
|----------------|-----------------------------|------------|------------------------------------|-----------------------------------|--------------------------------------|
| *Lease Name: | JULIAN D | *Location: | 2 30 39 C N2 | | |
| Well No. | AP No. (YR DRLD/PRE '67) | | n Section Line from South Line) | Type of Well (Oil/Gas/INJ/WSW) | Well Status (PROD/TA'S/Abandoned) |
| 2 | 151872005600 🗸 | 1250 FNL | 2560 FWL | 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>2_Twp. 30SR. 39W_</u> □East ☑ West |
| Address 1: P.O. Box 3092 | County: STANTON |
| Address 2: | Lease Name:JULIAN D 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 | · |
| | N2, NE Sec. 2 30S 39W |
| Surface Owner Information: | When filing a Form T-1 involving multiple surface owners, attach an additiona |
| 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: | |
| d the KCC with a plat showing the predicted locations of lea the plat are preliminary non-binding estimates. The location | 1 (Cathodic Protection Borehole Intent), you must supply the surface owners ase roads, tank batteries, pipelines, and electrical lines. The locations shown ns may be entered on the Form C-1 plat, Form CB-1 plat, or a separate pla |
| d the KCC with a plat showing the predicted locations of lea | ase roads, tank batteries, pipelines, and electrical lines. The locations showr |
| d the KCC with a plat showing the predicted locations of lea the plat are preliminary non-binding estimates. The location ay be submitted. | ase roads, tank batteries, pipelines, and electrical lines. The locations showr |
| d the KCC with a plat showing the predicted locations of lead 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 N | ase roads, tank batteries, pipelines, and electrical lines. The locations showr ns may be entered on the Form C-1 plat, Form CB-1 plat, or a separate pla |
| d the KCC with a plat showing the predicted locations of lead 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 Nowner(s) of the land upon which the subject well is or well. | ase 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 lotice Act (House Bill 2032), I have provided the following to the surface |
| d the KCC with a plat showing the predicted locations of lead 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 Nowner(s) of the land upon which the subject well is or well. | ase 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 plate lotice 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 the form being filed is a Form C-1 or Form CB-1, the plat(s) required by |
| In the KCC with a plat showing the predicted locations of least the plat are preliminary non-binding estimates. The location are be submitted. I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or worker (2) if this form; and 3) my operator name, address, phone not | ase 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 plate located. (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 the form being filed is a Form C-1 or Form CB-1, the plat(s) required by limber, fax, and email address. |
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| In the plat are preliminary non-binding estimates. The location are be submitted. It certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or with CP-1 that I am filling in connection with this form; 2) if this form; and 3) my operator name, address, phone nowner KCC will be required to send 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 \$30 choosing the second option, submit payment of the \$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, submit payment of the \$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, submit payment of the \$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, submit payment of the \$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, submit payment of the \$30.00 choosing the second option, submit payment of the \$30.00 choosing the second option and the associated Form C-1, Form CB-1. | ase 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 plate totice 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 the form being filed is a Form C-1 or Form CB-1, the plat(s) required by limber, fax, and email address. Ser(s). I acknowledge that, because I have not provided this information, surface owner(s). To mitigate the additional cost of the KCC performing to handling fee, payable to the KCC, which is enclosed with this form. So handling fee with this form. If the fee is not received with this form, the mT-1, or Form CP-1 will be returned. |
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| Name | Address1 | Address2 | City | State | ZIP | Sec | Twp | Rng |
|---------------------------------------|--------------|---|-----------|-------|-------|-----|-----|-----|
| JULIAN, MILTON E & KATHERINE M TRUSTS | PO BOX 513 | | NESS CITY | KS | 67560 | 2 | 30 | 39W |
| BYERS, WILMA S LIVING TRUST | 707 N DURHAM | | ULYSSES | KS | 67880 | 2 | 30 | 39W |
| BYERS, JOSEPH LIVING TRUST | 707 N DURHAM | 1 | ULYSSES | KS | 67880 | 2 | 30 | 39W |
| | | | | | | | | |

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KCC WICHITA