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.: 206858
☑ Gas Lease: No. of Gas**	Lease Name: <u>KELMAN</u>
☐ Gas Gathering System:	
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 15 29S 40W SW Qtr.
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	
	27117011
□ 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 \square N / \square 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 ☐ ☐ Drilling ☐ ☐
Past Operator's License No. 5952 Exp 16/30/12 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 RECEIVED
New Operator's License No. 33999	Contact Person: Nancy Fitzwater JUL 0 3 2012
New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser Date 6/25/2012 KCC WICHITA
Title Begyleten Compliance Advisor	Date 6/25/2012 ACC WICHITA
Title Regulatory Compliance Advisor	Signature Nancy Fitzwater
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 perm is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action	edgment of transfer pertains to Kansas Corporation Commission records only an
Date Authorized Signature	Date Authorized Signature
DISTRICT EPR 8/17/12	PRODUCTION 8-20-12 UIC 8-20-13
Mail to: Past Operator New Operator	erator District

Side Two Must Be Filed For All Wells

KDOR Lease No.: _					
*Lease Name:	KELMAN	*Location:	15 29 40 NE NE S	w	
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	151872030500 1	2540 FSL	2440 FWL	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.

Form T-1
March 2010
Form must be Typed
Form must be Signed
All blanks must be Filled

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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.: 220637
☑ Gas Lease: No. of Gas**	Lease Name: <u>KELMAN</u>
☐ Gas Gathering System:	<u>- SE_</u> Sec_ <u>15_</u> Twp <u>29S_</u> R_ <u>_40W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 15 29S 40W SE Qtr.
Spot Location:feet from □ N / □ S Line	2030.
· —	
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 Must Be Completed.	
Surface Pit Permit No.	feet from D N / D 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	Contact Person: Lou Barry Room 3.142B WL-1
Past Operator's Name & Address BP America Production Compa	
P.O. Box 3092, Houston, TX 77253	A 40.
Title Regulatory Supervisor	Signature Low Barry PECENTER
	RECEIVED
New Operator's License No. 33999	Contact Person: Nancy Fitzwater
New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	0.000 - 5
OUT TRAVIS, GUILO STOU TROUSION, TOXAS 77002	Oil/Gas Purchaser
Title Regulatory Compliance Advisor	Signature Mancy Fitzwaler
recorded in the records of the Kansas Corporation Commission. This a	ection authorization, surface pit permit #has been noted, approved and ducknowledgment of transfer pertains to Kansas Corporation Commission records only ar
does not convey any ownership interest in the above injection well(s) or	pit permit.
is acknowled	
the new operator and may continue to inject fluids as authorized by No.: . Recommended action	Permit the new operator of the above named lease containing the surface pit permitted by No.:
. Hecommended addon	
Date	
Authorized Signature	Authorized Signature
DISTRICTEPR	PRODUCTIONUIC
	New Operator District

Side Two Must Be Filed For All Wells

KDOR Lease No.:	220637				
*Lease Name:	KELMAN	*Location:	15 29 40 NW SE S	SE	
Well No.	AP No. (YR DRLD/PRE '67)		m Section Line ot from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
3НІ	151872077700 ^J	1250 FSL	1250 FEL	GAS	Producing
			-		
<u>,</u>					
					

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.: 226525
☑ Gas Lease: No. of Gas**	Lease Name: KELMAN
□ Gas Gathering System:	<u>- NE</u> Sec_15_Twp29S_R_40W_□ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 15 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 Must Se Completed.	
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul) □ Type of Pit: □ Emergency □ Burn □ Sett	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. <u>5952</u> Past Operator's Name & Address <u>BP America Production Co</u> P.O. Box 3092, Houston, TX 77253 Title <u>Regulatory Supervisor</u>	Date 6/25/2012
New Operator's License No. 33999 New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	0.00
Title Regulatory Compliance Advisor	Date 6/25/2012 KCC WICHITA
	of injection authorization, surface pit permit #has been noted, approved and definis acknowledgment of transfer pertains to Kansas Corporation Commission records only a solution or pit permit.
the new operator and may continue to inject fluids as authorized No.: Recommended action	
Date	DateAuthorized Signature
Authorized Signature	Authorized Signature
DISTRICTEPR	PRODUCTIONUIC New Operator District

Side Two Must Be Filed For All Wells

	A	4	Must De
KDOR Lease No.:	226525		

REON Eduse No			-		
*Lease Name:	KELMAN	*Location:	15 29 40 NE NE N	<u> E</u>	
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)
4	151872105600 /	330 FNL	330 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>15</u> Twp. <u>29S</u> R. <u>40W</u> □East ☑ West		
Address 1: P.O. Box 3092	County: STANTON		
Address 2:	Lease Name: KELMAN 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	description of the lease below.		
	NE, SE, SW Sec. 15 29S 40W		
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:			
f this form is being submitted with a Form C-1 (Intent) or CB-1 and the KCC with a plat showing the predicted locations of leas on the plat are preliminary non-binding estimates. The locations	(Cathodic Protection Borehole Intent), you must supply the surface owners se roads, tank batteries, pipelines, and electrical lines. The locations shown s may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat		
f this form is being submitted with a Form C-1 (Intent) or CB-1 and the KCC with a plat showing the predicted locations of leas on the plat are preliminary non-binding estimates. The locations hay be submitted.	(Cathodic Protection Borehole Intent), you must supply the surface owners 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 RECEIVEL		
f this form is being submitted with a Form C-1 (Intent) or CB-1 and the KCC with a plat showing the predicted locations of leas on the plat are preliminary non-binding estimates. The locations nay be submitted. Select one of the following:	(Cathodic Protection Borehole Intent), you must supply the surface owners 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 RECEIVEL		
☑ I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will.	(Cathodic Protection Borehole Intent), you must supply the surface owners see 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 RECEIVEL JUL 03 20 tice Act (House Bill 2032), I have provided the following to the surface WICHI be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CB-1, the plat(s) required by wher, fax, and email address.		
 ☑ I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the this form; and 3) my operator name, address, phone num ☐ I have not provided this information to the surface owner the KCC will be required to send this information to the s 	tice Act (House Bill 2032), I have provided the following to the surface WICH! I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CB form being filed is a Form C-1 or Form CB-1, the plat(s) required by		
 ✓ I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the this form; and 3) my operator name, address, phone num ✓ I have not provided this information to the surface owner the KCC will be required to send this information to the s this task, I acknowledge that I am being charged a \$30.00 	tice Act (House Bill 2032), I have provided the following to the surface WICH, be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form C with the form being filed is a Form C-1 or Form CB-1, the plat(s) required by aber, fax, and email address. In (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. In the fee is not received with this form, the		
 ✓ I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the this form; and 3) my operator name, address, phone num ✓ I have not provided this information to the surface owner the KCC will be required to send this information to the s this task, I acknowledge that I am being charged a \$30.00 ff choosing the second option, submit payment of the \$30.00 	tice Act (House Bill 2032), I have provided the following to the surface WICHI be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CB-1 be form being filed is a Form C-1 or Form CB-1, the plat(s) required by other, fax, and email address. In acknowledge that, because I have not provided this information, purface owner(s). To mitigate the additional cost of the KCC performing to handling fee, payable to the KCC, which is enclosed with this form. In the fee is not received with this form, the T-1, or Form CP-1 will be returned.		

COLLINGWOOD, AL J	COLLINGWOOD FARMS LLC	MEADOWLAND INC	ADAMS, TROY L & CHERYL A	Name	Surface Owner Attachment
BOX 903	BOX 903	BOX 914	BOX 628	Address1	
				Address2	
JOHNSON	JOHNSON	JOHNSON	JOHNSON		RECEIVED JUL 03 2012 C WICHITA
ĸs	Š	KS	S	State	
67855-0903	67855-0903	67855-0914	67855-0628	ZIP	
15	15	15	15	Sec	
29	29	29	29	Twp	
40W	40W	40W	40W	Rng	