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.: 203087
☑ Gas Lease: No. of Gas**	Lease Name: PRICE A
☐ Gas Gathering System:	<u>- NE_Sec_19_Twp26S_R_38W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 19 26S 38W 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(e): CHASE
Number of injection wells	Injection Zone(s):
Field Name HUGOTON	
** Side Two Must Be Completed.	ing in the second secon
	C C C C C C C C C C C C C C C C C C C
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul)	feet from \square N / \square S Line feet from \square E / \square W Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	☐ Haul-Off ☐ Workover ☐ ☐ Drilling ☐
Past Operator's Name & Address BP America Production Company P.O. Box 3092, Houston, TX 77253 Title Regulatory Supervisor	Phone281-366-7816 Date
New Operator's License No. <u>33999</u>	Contact Person: Nancy Fitzwater JUL n 3 2012
New Operator's Name & Address Linn Operating, Inc.	Phone <u>281-840-4266</u>
600 Travis, Suite 5100 Houston, Texas 77002	Phone <u>281-840-4266</u> Oil/Gas Purchaser
Title Regulatory Compliance Advisor	Signature Nancy Fitzwaler
	is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.: Date Authorized Signature
DISTRICT EPR 9/19/12	PRODUCTION 9.20.12 UIC 9-20-12 District
Mail to: Past Operator New Op	DISTRICTDISTRICT

Side Two Must Be Filed For All Wells

KDOR Lease No.:	203087	Must be	-		
*Lease Name:	PRICE A	*Location:	19 26 38 SW SW N	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)
1	150930059200 /	2790 FSL	2490 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.

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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.: 219889
☑ Gas Lease: No. of Gas**	Lease Name: PRICE A
☐ Gas Gathering System:	<u>NW_</u> Sec_ <u>19_Twp26S_R_38W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 19 26S 38W NW 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	injection zone(s).
** Side Two Must Be Completed.	
Surface Dit Dormit No.	feet from □ N / □ S Line
Surface Pit Permit No. (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 NoBP America Production Company	Contact Person: Lou Barry Room 3.142B WL-1 Phone 281-366-7816
P.O. Box 3092, Houston, TX 77253	Date <u>6/25/2012</u>
Title Regulatory Supervisor	Signature Lou Barry
New Operatoric Harris No. 10000	ASCEIVEL
New Operator's License No. 33999 New Operator's Name & Address Linn Operating, Inc.	Contact Person: Nancy Fitzwater Phone 281-840-4266 JUL 03 201
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser
Title Regulatory Compliance Advisor	
	Signature Nancy Fitzwaler
	authorization, surface pit permit #has been noted, approved and du ledgment of transfer pertains to Kansas Corporation Commission records only armit.
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 permitted by No.:
DateAuthorized Signature	Date
Authorized Signature	Authorized Signature
DISTRICTEPR Mail to: Past Operator	PRODUCTIONUIC District
	JUILUI DIGITUL

Side Two Must Be Filed For All Wells

KDOR Lease No.:	219889	<u>, </u>			
*Lease Name:	PRICE A	*Location:	19 26 38 SE NW N	IW	
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)
3HI	150932120700 🗸	4030 FSL	4030 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.

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	of Transfer:	July 1, 2012
□ Oil Lease: No. of Oil Wells	** KS Dept of Rever	nue Lease No.:	206974
☑ Gas Lease: No. of Gas**	Lease Name:		
☐ Gas Gathering System:		c <u>19</u> Twp <u>26S</u> R	2 38W DEDW
□ Saltwater Disposal Well - Permit No.:			
	Legal Description	of Lease: <u>Sec.</u>	19 265 38W 52
Spot Location:feet from □ N / □ S Line			
feet from D E / D W Line			
☐ Enhanced Recovery Project Permit No.:	County: KE	EARNY	
Entire Project: ☐ Yes ☐ No	Production Zone((s):CO	UNCIL GROVE
Number of injection wells	Injection Zone(s):		
Field Name PANOMA *** Side Two Must Be Completed.			
Surface Pit Permit No.		feet from □ N / I	⊐ S Line
(API No. if Drill Pit. WO or Haul)		feet from □ E / □	
☐ Type of Pit: ☐ Emergency ☐ Burn ☐	Settling Haul-Off	☐ Workover	
Past Operator's License No5952 Past Operator's Name & AddressBP America Production P.O. Box 3092, Houston, TX 77253	Company Phone	6-7816	3.142B WL-1
Title Regulatory Supervisor	Signature	200 00	•
New Operator's License No. 33999	Contact Person:	Nancy Fitzwater	RECEIVED
New Operator's Name & Address Linn Operating, Inc.	Phone 281-84	0-4266	JUL 0 3 2012
600 Travis, Suite 5100 Houston, Texas 77002		" 	
Title Regulatory Compliance Advisor	Date <u>6/25/2012</u> Signature	Nancy Fl	Egwater KCC WICHITA
	. This acknowledgment of transfer pert rell(s) or pit permit.	tains to Kansas Con	poration Commission records only ar is acknowledged as
the new operator and may continue to inject fluids as author No.: Recommended action			lease containing the surface pit
Date Authorized Signature	Date	Au	nthorized Signature
DISTRICTEPR	PRODUCTION	UIC	
Mail to: Past Operator	New Operator		District

Side Two Must Be Filed For All Wells

KDOR Lease No.:		Dr.	-		
*Lease Name:		*Location:	19 26 38 C S2		
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)
2	150932007000 🗸	1250 FSL	2590 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.

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>19</u> Twp. <u>26S</u> R. <u>38W</u> □East ☑ West
Address 1: P.O. Box 3092	County: KEARNY
Address 2:	Lease Name:PRICE A 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	NE, NW, S2 Sec. 19 26S 38W
Surface Owner Information: Name: See Surface Owner Attachment Address 1: Address 2: Zip: Zip:	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 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.
may be submitted.	RECEIVEL JUL 0 3 20 otice Act (House Bill 2032). I have provided the following to the surface
owner(s) of the land upon which the subject well is or wi CP-1 that I am filing in connection with this form; 2) if the	will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, of the form being filed is a Form C-1 or Form CB-1, the plat(s) required by
this form; and 3) my operator name, address, phone nur	mber, tax, 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.
the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30.00 of the second option, submit payment of the \$30.00 of t	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. O handling fee with this form. If the fee is not received with this form, the
the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30.0	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. 0 handling fee with this form. If the fee is not received with this form, the m T-1, or Form CP-1 will be returned.

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

Name	Address1	Address2	City	State	ZIP	Sec	Twp	Rng
KLASSEN, H C & VELMA L REVOCABLE TRUST	10400 SE CR 35 BOX 51		KENDALL	KS	67857	19	26	38W
CAMPBELL, JAMES CASSIUS TR	76 VILLAGE DEL LAGO CIR	4600 HWY A1A SOUTH	ST AUGUSTINE	FL	32080	19	26	38W
FANNING, MARGARET IRREVOCABLE TRUST	Attn: SWANK, KATHY	5631 BUTLER RD	MERIDEN	KS	66512	19	26	38W

RECEIVED
JUL 0 3 2012
KCC WICHITA