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.

Chec	k Applicable Boxes:	Effective Date of Transfer: July 1, 2012
	Oil Lease: No. of Oil Wells**	KS Dept of Revenue Lease No.:
Ø	Gas Lease: No. of Gas**	Lease Name: SCHOWALTER
-	Gas Gathering System:	NE_Sec_9_Twp28S_R_39W_□ E □ W
- ;	Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 9 28S 39W NE Qtr.
;	Spot Location:feet from □ N / □ S Line	
	feet from 🗆 E / 🗆 W Line	
	Enhanced Recovery Project Permit No.:	County: STANTON
ı	Entire Project: ☐ Yes ☐ No	Production Zone(s):CHASE
ı	Number of injection wells	Injection Zone(s):
Field	Name HUGOTON	
		<u> </u>
Surfa	ce Pit Permit No.	feet from □ N / □ S Line
	(API No. if Drill Pit. WO or Haul)	feet from \square E / \square W Line
⊔Тур	oe of Pit: Emergency Burn Settling	☐ Haul-Off ☐ Workover() 1 ☐ Drilling
P.O. I	Operator's License No. 5952 Exp (a) 30//2 Operator's Name & Address BP America Production Company Box 3092, Houston, TX 77253 Regulatory Supervisor Operator's License No. 33999	Contact Person:Lou Barry Room 3,142B WL-1 Phone281-366-7816 Date6/25/2012 Signature
	Operator's Name & Address Linn Operating, Inc.	Phone <u>281-840-4266</u>
	0 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser
Title .	Regulatory Compliance Advisor	Signature <u>Nancy Fitzwater</u>
does i	ded in the records of the Kansas Corporation Commission. This acknowled not convey any ownership interest in the above injection well(s) or pit permi	is acknowledged as
	ew operator and may continue to inject fluids as authorized by Permit Recommended action	the new operator of the above named lease containing the surface pit permitted by No.:
Date	Authorized Signature	Date Authorized Signature
	TRICTEPR	PRODUCTION 8.30.12 UIC 8-30-12 RECEIVED

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202 JUL 0 3 2012

KCC WICHITA

Side Two Must Be Filed For All Wells

KDOR Lease No.:	203458	<u>. </u>			
*Lease Name:		*Location:	9 28 39 SW	SW NE	
Well Nó.	AP No. (YR DRLD/PRE '67)	Footage from (i.e. FS:L = Feet fi		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	151870035900 [/]	2640 FSL	2640 FWL	GAS	Producing
				mark and the	
				. 6	
			· · · · · · · · · · · · · · · · · · ·		

*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.

Office State 1

A separate sheet may be attached if necessary.

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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.: 217909
☑ Gas Lease: No. of Gas**	Lease Name: SCHOWALTER G U
□ Gas Gathering System:	<u>-NW_Sec_9_Twp28S_R_39W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 9 28S 39W NW 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	
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. <u>5952</u>	Contact Person: Lou Barry Room 3.142B WL-1
Past Operator's Name & AddressBP America Production Company_ P.O. Box 3092, Houston, TX 77253	Phone <u>281-366-7816</u> Date <u>6/25/2012</u>
Title Regulatory Supervisor	Signature Low Barry
New Operator's License No. 33999 New Operator's Name & Address Linn Operating, Inc. 600 Travis, Sulte 5100 Houston, Texas 77002 Title Regulatory Compliance Advisor	Contact Person: Nancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Tancy Titywater
recorded in the records of the Kansas Corporation Commission. This acknowle	uthorization, surface pit permit #has been noted, approved and duly adgment of transfer pertains to Kansas Corporation Commission records only and
does not convey any ownership interest in the above injection well(s) or pit perm 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 permitted by No.:
DateAuthorized Signature	DateAuthorized Signature
DISTRICTEPR	PRODUCTIONUICPEOPIN
Mail to: Past Operator New Ope	

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

JUL 03 2012

KCC WICHITA

Side Two Must Be Filed For All Wells

KDOR Lease No.:	217909				
*Lease Name:	SCHOWALTER G	U*Loc	cation: <u>9 28 39</u>	NE SW NW	_
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)
3НІ	151872060300 /	3795 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.

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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.: 206992
☑ Gas Lease: No. of Gas**	Lease Name:SCHOWALTER
□ Gas Gathering System:	
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 9 28S 39W E2
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 NamePANOMA	
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 \square Haul-Off \square Workover \square Drilling
Past Operator's License No	Contact Person: Lou Barry Room 3.142B WL-1 Phone 281-366-7816 Date 6/25/2012 Signature Lou Barry Contact Person: Nancy Fitzwater Phone 281-840-4266
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser Date 6/25/2012
Title Regulatory Compliance Advisor	Signature Nancy Fitzwater
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action	
Date	Date
Authorized Signature	Authorized Signature
DISTRICTEPR	PRODUCTIONUIC perator District
12 (1)	DEPENIES

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

RECEIVED

JUL 0 3 2012

KCC WICHITA

Side Two Must Be Filed For All Wells

*Lease Name: SCHOWALTER	KDOR Lease No.:	206992	<u>-</u>			
(YR DRLD/PRE '67) (i.e. FS:L = Feet from South Line) (Oil/Gas/INJ/WSW) (PROD/TA'S/Abandoned)	*Lease Name:	SCHOWALTER	*Location	: <u>9 28 39 C E</u> 2	2	
2 151872008300 / 2590 FSL 1250 FEL GAS Producing	Well No.				= :	
	2	151872008300 /	2590 FSL	1250 FEL	GAS	Producing
			-			

A separate sheet may be attached if necessary.

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^{&#}x27;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)	CB-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: City: City: Houston State: Texas Zip: 77253 Contact Person: DeAnn Smyers Phone: (281) 366-4395 Fax: (281) 366-7836	Well Location:Sec. 9 Twp. 28S R. 39W □East ☑ West County:STANTON Lease Name:SCHOWALTER Well #: If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Email Address: <u>smyerscd@bp.com</u>	NE, E2, NW Sec. 9 28S 39W
Surface Owner Information: Name: See Surface Owner Attachment Address 1: Address 2: City: State: 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.
and the KCC with a plat showing the predicted locations of lea	1 (Cathodic Protection Borehole Intent), you must supply the surface owners ase roads, tank batteries, pipelines, and electrical lines. The locations shown as may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat
Select one of the following:	
owner(s) of the land upon which the subject well is or w	otice Act (House Bill 2032), I have provided the following to the surface ill be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form he form being filed is a Form C-1 or Form CB-1, 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 n T-1, or Form CP-1 will be returned.
hereby certify that the statements made herein are true and co	prrect to the best of my knowledge and belief.
Date: June 25, 2012 Signature of Operator or Ag	ent: Lou Barry Title: Regulatory Supervisor

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

Name	Address1	Address2	City	State	ZIP	Sec	Twp	Rng
EASTSIDE DAIRY II LLC	9620 E RD 8		NOSNHO	KS	67855	6	78	39W
KENDRICK, RONALD KAY & BARBARA J REVOCABLE TRUSTS	BOX 450		NOSNHOF	S	67855-0450	6	28	39W