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.: 203526	_ 12
☑ Gas Lease: No. of Gas**	Lease Name: SHORE, F. "A"	ς
☐ Gas Gathering System:	<u>- SW_</u> Sec <u>13_</u> Twp <u>29S_R_39W</u> □ E □ W	Shore
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 13 29S 39W SW Qtr.	
Spot Location:feet from □ N / □ S Line		<u></u>
feet from $\square$ E / $\square$ W Line		
□ Enhanced Recovery Project Permit No.:	County: STANTON	<u> </u>
Entire Project: ☐ Yes ☐ No	Production Zone(s):CHASE	+
Number of injection wells	Injection Zone(s):	CEIVED
Field NameHUGOTON		2 8 2012
Surface Pit Permit No.  (API No. if Drill Pit. WO or Haul)  Type of Pit:   Emergency  Burn  Settling		VICHITA
Past Operator's License No. 5952 Exp. 6/30/12— Past Operator's Name & Address Bir 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 Lou Barry  Lou Barry  Signature	
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 Compliance Advisor	Signature	
Acknowledgment of Transfer: The above request for transfer of injection a recorded in the records of the Kansas Corporation Commission. This acknowledges not convey any ownership interest in the above injection well(s) or pit permanent.	edgment of transfer pertains to Kansas Corporation Commission in nit.	ecords only ark
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action		wledged as surface pit
Date Authorized Signature	Date Authorized Signature	
DISTRICTEPR9/28/12New O	PRODUCTION 10.2.12 UIC 10.2.12 District	

### Side Two Must Be Filed For All Wells

		<b>Pa</b>	
KDOR Lease No.:	203526	<i>V</i>	

*Lease Name:	SHORE, F. "A"	*Location: _	13 29 39 NE	NE NE SW	_
Well No.	AP No. (YR DRLD/PRE '67)	Footage from S (i.e. FS:L = Feet from	ection Line	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	151870018800 /	2640 FSL	2640 FEL	GAS	Producing
	-				
-					
				-	
	70. 40. 10.				
			77.		
			<u> </u>		
					-
· .	·				
	-				

A separate sheet may be attached if necessary.

<sup>\*</sup>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	Fransfer: July 1, 2012	
□ Oil Lease: No. of Oil Wells**	KS Dept of Revenue	Lease No.: 2078	52 7
☑ Gas Lease: No. of Gas***		IORE, F. "A"	
☐ Gas Gathering System:	<u>NE</u> Sec_	<u>13_</u> Twp <u>29S_</u> R_ <u>39W</u> □E	□W
		f Lease: <u>Sec. 13 29S 39W</u>	
□ Saltwater Disposal Well - Permit No.:	Legal Description o		
Spot Location:feet from □ N / □ S Line			
feet from D E / D W Line	· · · · · · · · · · · · · · · · · · ·		
☐ Enhanced Recovery Project Permit No.:	County: STA	NTON	
Entire Project: ☐ Yes ☐ No	Production Zone(s)	COUNCIL GRO	
Number of injection wells	Injection Zone(s): _		RECEIVED
Field Name PANOMA  ** Side Two Milet Be Completed.			SEP 2 8 2012
Surface Pit Permit No.  (API No. if Drill Pit. WO or Haul)  Type of Pit:   Emergency   Burn   Settling	☐ Haul-Off	feet from □ N / □ S Line feet from □ E / □ W Line □ Workover □ Drilling	KCC WICHITA
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  Title <u>Regulatory Supervisor</u>	Phone <u>281-366</u> Date <u>6/25/201</u>	Lou Barry Room 3.142B WL-7816 2 Lou Barry	
	Contact Person:	Nancy Fitzwater	JUL 0.3 201
New Operator's License No. <u>33999</u> New Operator's Name & Address <u>Linn Operating, Inc.</u>	Phone 281-840	-4266	
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser		KCC WICHIT
Title Regulatory Compliance Advisor		Nancy Fitzwater	
Acknowledgment of Transfer: The above request for transfer of injection a recorded in the records of the Kansas Corporation Commission. This acknowledges not convey any ownership interest in the above injection well(s) or pit permits a cknowledged as the new operator and may continue to inject fluids as authorized by Permits No.: Recommended action	edgment of transfer perta	the above named lease conf	is acknowledged as aining the surface pit
Authorized Signature		Authorized Sig	gnature
DISTRICT EPR	PRODUCTION		
	perator	District	

### Side Two Must Be Filed For All Wells

M

KDOR Lease No.:	207852_V				
*Lease Name:	SHORE, F. "A"	*Location:	13 29 39 C N	NE	
Well No.	AP No. (YR DRLD/PRE '67)	Footage from (i.e. FS:L = Feet	Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
2	151872002500 /	3960 FSL	1320 FEL	GAS	Producing
		-			
<u> </u>					
			·		
			***************************************		

A separate sheet may be attached if necessary.

<sup>\*</sup>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.: 218600
☑ Gas Lease: No. of Gas**	Lease Name: SHORE, F. "A"
☐ Gas Gathering System:	<u>SE_</u> Sec_ <u>13_</u> Twp <u>_ 29S_</u> R_ <u>39W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 13 29S 39W SE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	
☐ Enhanced Recovery Project Permit No.:	County:STANTON
Entire Project:	Production Zone(s):CHASE
Number of injection wells	Injection Zone(s):RECEIVED
Field Name HUGOTON  **Side Two Must Be Completed.	SEP 2 8 2012
Surface Pit Permit No.  (API No. if Drill Pit. WO or Haul)  Type of Pit:   Emergency  Burn  Settling	feet from \( \text{N / \( \text{S Line} \) feet from \( \text{D F / \( \text{U W CHITA} \)} \) Haul-Off \( \text{Workover} \( \text{D rilling} \)
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 3.1428 WL-1 Phone 281-366-7816 Date 6/25/2012  Signature Lou Barry Room 3.1428 WL-1  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	Phone <u>281-840-4266</u> Oil/Gas Purchaser
Title Regulatory Compliance Advisor	Signature Nancy Fitzwaler
Acknowledgment of Transfer: The above request for transfer of injection recorded in the records of the Kansas Corporation Commission. This acknowledges not convey any ownership interest in the above injection well(s) or pit is acknowledged.	as is acknowledged as
the new operator and may continue to inject fluids as authorized by Per No.: Recommended action	
Date Authorized Signature	Date Authorized Signature
DISTRICTEPR	PRODUCTIONUIC
	v Operator District

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

### Side Two Must Be Filed For All Wells

KDOR Lease No.: _	218600				
*Lease Name:	SHORE, F. "A"	*Location	: <u>13 29 39 NW</u>	/ SE SE	
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)
3	151872049900 /	1250 FSL	1250 FEL	GAS	Producing
					<u> </u>

A separate sheet may be attached if necessary.

<sup>\*</sup>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

KCC WICHITA

## 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>13</u> Twp. <u>29S</u> R. <u>39W</u> C	∃East ☑ West
Address 1: P.O. Box 3092	County: STANTON  Lease Name: SHORE, F. "A" Well #:	
Address 2:		
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, SE, SW Sec. 13 29S 39W	
Surface Owner Information:	When filling a Form T-1 involving multiple surface owners, a	attach an additional
Name: See Surface Owner Attachment	sheet listing all of the information to the left for each surfa	
Address 1:	owner information can be found in the records of the regis	
Address 2:	county, and in the real estate property tax records of the co	ounty treasurer.
City: State: Zip:		
and the KCC with a plat showing the predicted locations of on the plat are preliminary non-binding estimates. The locat	B-1 (Cathodic Protection Borehole Intent), you must supply the lease roads, tank batteries, pipelines, and electrical lines. The tions may be entered on the Form C-1 plat, Form CB-1 plat, c	or a separate plat
on the plat are preliminary non-binding estimates. The locat may be submitted. Select one of the following:	lease roads, tank batteries, pipelines, and electrical lines. The tions may be entered on the Form C-1 plat, Form CB-1 plat, c	or a separate plat RECEIVED JUL 0 3 2012
and the KCC with a plat showing the predicted locations of on 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 owner(s) of the land upon which the subject well is o	lease roads, tank batteries, pipelines, and electrical lines. The tions may be entered on the Form C-1 plat, Form CB-1 plat, or representations and the following to be recommended in the following to be recommended: 1) a copy of the Form C-1, Form CB-1, Form if the form being filed is a Form C-1 or Form CB-1, the plat(s)	JUL 0 3 2012  or the surface CT-1, or Form
and the KCC with a plat showing the predicted locations of on 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 owner(s) of the land upon which the subject well is on CP-1 that I am filling in connection with this form; 2) this form; and 3) my operator name, address, phone  I have not provided this information to the surface of the KCC will be required to send this information to the	lease roads, tank batteries, pipelines, and electrical lines. The tions may be entered on the Form C-1 plat, Form CB-1 plat, or representations and the following to be recommended in the following to be recommended: 1) a copy of the Form C-1, Form CB-1, Form if the form being filed is a Form C-1 or Form CB-1, the plat(s)	JUL 0 3 2012  The surface CC WICHITA  To required by  Sinformation, C performing
Ind the KCC with a plat showing the predicted locations of an 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 owner(s) of the land upon which the subject well is on CP-1 that I am filling in connection with this form; 2) this form; and 3) my operator name, address, phone  I have not provided this information to the surface of the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$1 ft choosing the second option, submit payment of the \$30 ft.	lease roads, tank batteries, pipelines, and electrical lines. The tions may be entered on the Form C-1 plat, Form CB-1 plat, or received in the form C-1 plat, Form CB-1 plat, or will be located: 1) a copy of the Form C-1, Form CB-1, Form if the form being filed is a Form C-1 or Form CB-1, the plat(s) number, fax, and email address.  Inwher(s). I acknowledge that, because I have not provided this the surface owner(s). To mitigate the additional cost of the KCC 30.00 handling fee, payable to the KCC, which is enclosed with 0.00 handling fee with this form. If the fee is not received in	T-1, or Form  To required by  Information, C performing h this form.
and the KCC with a plat showing the predicted locations of an 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 owner(s) of the land upon which the subject well is on CP-1 that I am filing in connection with this form; 2) this form; and 3) my operator name, address, phone  □ I have not provided this information to the surface of the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$1 ft choosing the second option, submit payment of the \$30 ft CNONA-1 form and the associated Form C-1, Form CB-1, F	lease roads, tank batteries, pipelines, and electrical lines. The tions may be entered on the Form C-1 plat, Form CB-1 plat, or Notice Act (House Bill 2032), I have provided the following to be right will be located: 1) a copy of the Form C-1, Form CB-1, Form if the form being filed is a Form C-1 or Form CB-1, the plat(s) number, fax, and email address.  I acknowledge that, because I have not provided this the surface owner(s). To mitigate the additional cost of the KCC (30.00 handling fee, payable to the KCC, which is enclosed with 0.00 handling fee with this form. If the fee is not received with the common that the surface is not received with the common that the surface is not received with the common that the surface is not received with the common that the surface is not received with the common that the surface is not received with the common that the surface is not received with the common that the surface is not received with the surfa	T-1, or Form  To required by  Information, C performing h this form.
Ind the KCC with a plat showing the predicted locations of an 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 owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) this form; and 3) my operator name, address, phone  I have not provided this information to the surface or the KCC will be required to send this information to this task, I acknowledge that I am being charged a \$1 ft choosing the second option, submit payment of the \$30 ft choosing the associated Form C-1, Form CB-1, Form CB	lease roads, tank batteries, pipelines, and electrical lines. The tions may be entered on the Form C-1 plat, Form CB-1 plat, or Notice Act (House Bill 2032), I have provided the following to be right will be located: 1) a copy of the Form C-1, Form CB-1, Form if the form being filed is a Form C-1 or Form CB-1, the plat(s) number, fax, and email address.  I acknowledge that, because I have not provided this the surface owner(s). To mitigate the additional cost of the KCC (30.00 handling fee, payable to the KCC, which is enclosed with 0.00 handling fee with this form. If the fee is not received with the common that the surface is not received with the common that the surface is not received with the common that the surface is not received with the common that the surface is not received with the common that the surface is not received with the common that the surface is not received with the common that the surface is not received with the surfa	T-1, or Form Or performing this form, the
and the KCC with a plat showing the predicted locations of an 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 owner(s) of the land upon which the subject well is of CP-1 that I am filling in connection with this form; 2) this form; and 3) my operator name, address, phone  □ I have not provided this information to the surface of the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$1 the choosing the second option, submit payment of the \$30 the KSONA-1 form and the associated Form C-1, Form CB-1, Finereby certify that the statements made herein are true and Date:  □ June 25, 2012 Signature of Operator or	lease roads, tank batteries, pipelines, and electrical lines. The tions may be entered on the Form C-1 plat, Form CB-1 plat, or Notice Act (House Bill 2032), I have provided the following to be rivilled by the form C-1, Form CB-1, Form CB-1, Form CB-1, form CB-1, the plat(s) number, fax, and email address.  I acknowledge that, because I have not provided this the surface owner(s). To mitigate the additional cost of the KCC (30.00 handling fee, payable to the KCC, which is enclosed with the corm T-1, or Form CP-1 will be returned.  I decorrect to the best of my knowledge and belief.	T-1, or Form Or performing this form, the

	Address1	Address2	City	State	ZIP	Sec	Wp	RS
Name	7,000		III VOCEC	70	67880	'n	29	Wer
JOHNSON, MARILYN C REVOCABLE TRUST	3538 S RD C		ULYSSES	2	0/000	1		
	F100 F 30 17		OHOSON	- S	67855	H	29	Wes
RIDGWAY, ROBERTA M & PHILIP L REVOCABLE TRUST	5160 E KD 1/		JOHNSON	1	67000		3	300
DVEDC IONELI	740 E MAIZE ST		ULYSSES	ē	6/880	13	23	9460
01110/3011111		ביי מייי בייני	HAVSVILLE	<u> </u>	47060	13	29	ω Weε
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