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.: 203532
☑ Gas Lease: No. of Gas**	Lease Name: STRACKELJHN A
☐ Gas Gathering System:	<u>- NW_</u> Sec_ <u>18_Twp26S_R_32W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 18 26S 32W NW Qtr.
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	
□ Enhanced Recovery Project Permit No.:	County: FINNEY
Entire Project: ☐ Yes ☐ No	Production Zone(s): CHASE
Number of injection wells	Injection Zone(s):
Field Name HUGOTON ** Side Two Must Be Completed:	ក ជ ក ក
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul)	feet from □ N / □ S Line □ □ W Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	☐ Haul-Off ☐ Workover ☐ Drilling ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
Past Operator's License No. 5952 Fxp 436/12 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 Lou Barry Room 3.142B WL-1 Signature
	RECEIVED
New Operator's License No. 33999 Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	Contact Person: Nancy Fitzwater Phone 281-840-4266 JUL 0.3 2012 Oil/Gas Purchaser Date 6/25/2012
Title Regulatory Compliance Advisor	Signature Mancy Fitywater KCC WICHITA
Acknowledgment of Transfer: The above request for transfer of injection aur 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	dgment of transfer pertains to Kansas Corporation Commission records only an
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 Authorized Signature	Date Authorized Signature
DISTRICT EPR 8//3//2 Mail to: Past Operator New Operator	PRODUCTION 8.14.12 UIC 8-14-12 District

Side Two Must Be Filed For All Wells

KDOR Lease No.:	203532	Dr. Must be I	ned I OI All Well		
*Lease Name:	STRACKELJHN A	*Loca	tion: <u>18 26 32</u>	SE SE 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)
1	150550066100 √	2640 FSL	2640 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.

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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.:219504
☑ Gas Lease: No. of Gas**	Lease Name: STRACKELJHN A
☐ Gas Gathering System:	
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 18 26S 32W NE Qtr.
Spot Location: feet from □ N / □ S Line	
feet from □ E / □ W Line	
□ Enhanced Recovery Project Permit No.:	County: FINNEY
Entire Project: ☐ Yes ☐ No	Production Zone(s):CHASE
Number of injection wells	Injection Zone(s):
Field Name HUGOTON State Two Must Be Completed.	
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 ☐ S	ettling Haul-Off Workover Drilling
Past Operator's License No. 5952	Contact Person: Lou Barry Room 3.142B WL-1
Past Operator's Name & AddressBP America Production 0	<u>Company</u> Phone <u>281-366-7816</u>
P.O. Box 3092, Houston, TX 77253	Date 6/25/2012
Title Regulatory Supervisor	Signature Lou Barry RECEIVED
	NECEIVED
New Operator's License No. 33999	Contact Person: Nancy Fitzwater JUL 0 3 2012
New Operator's Name & Address <u>Linn Operating, Inc.</u> 600 Travis, Suite 5100 Houston, Texas 77002	Phone <u>281-840-4266</u>
000 Havis, Suite 3100 Flousion, Texas 77002	Date 6/25/2012 KCC WICHITA
Title Regulatory Compliance Advisor	
	r of injection authorization, surface pit permit #has been noted, approved and c
does not convey any ownership interest in the above injection we	This acknowledgment of transfer pertains to Kansas Corporation Commission records only all(s) or pit permit.
	nowledged as is acknowledged as
the new operator and may continue to inject fluids as authoriz	
No.:, Recommended action	permitted by No.:
Data	Date
Date Authorized Signature	Authorized Signature
DISTRICTEPR	PRODUCTIONUIC
Mail to: Past Operator	New Operator District

Side Two Must Be Filed For All Wells

KDOR Lease No.:	219504				
*Lease Name:	STRACKELJHN A	*Loca	tion: <u>18 26 32</u>	SW NE NE	
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)
2HI	150552121200 🗸	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.

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 (C	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: Houston State: Texas Zip: 77253	Well Location:Sec. 18 Twp. 26S R. 32W □East ☑ West County:FINNEY Lease Name: STRACKELJHN A Well #:
Contact Person: DeAnn Smyers Phone: (281) 366-4395 Fax: (281) 366-7836 Email Address: smyerscd@bp.com	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: NE, NW Sec. 18 26S 32W
Surface Owner Information: Name: See Surface Owner Attachment Address 1:	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 lease ro	thodic Protection Borehole Intent), you must supply the surface owners pads, tank batteries, pipelines, and electrical lines. The locations shown ay be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat
Select one of the following:	RECEIVED JUL 0 3 2012
	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CC WICHITA rm being filed is a Form C-1 or Form CB-1, the plat(s) required by
the KCC will be required to send this information to the surfa	I acknowledge that, because I have not provided this information, ace owner(s). To mitigate the additional cost of the KCC performing andling fee, payable to the KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 har KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1,	ndling fee with this form. If the fee is not received with this form, the , or Form CP-1 will be returned.
I hereby certify that the statements made herein are true and correct	to the best of my knowledge and belief.
Date: June 25, 2012 Signature of Operator or Agent:	Lou Barry Title: Regulatory Supervisor

	VIJAHN INC	KLEYSTEUBER, JEANNE M REVOCABLE TRUST	Name
	Attn: JEANETTE J FORD, SEC/TREAS 2088 BAYOU DERBONNE	1608 E FAIR ST	Address1
RD	2088 BAYOU DERBONNE		Address2
	NATCHITOCHES	GARDEN CITY	City
	⋝	S	State
	71457-2751	67846-3532	ZIP
	18	18	Sec
	26	26	Twp
	32W	32W	Rng

RECEIVED
JUL 0 3 2012
KCC WICHITA