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.: 207039 ✓
☑ Gas Lease: No. of Gas**	Lease Name: STUCKY A
☐ Gas Gathering System:	<u>- NE_</u> Sec_ <u>18_</u> Twp <u>23S_</u> R <u>36W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 18 23S 36W NE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	
□ Enhanced Recovery Project Permit No.:	County: KEARNY ===
Entire Project:	<u> </u>
·	Production Zone(s): COUNCIL GROVE
Number of injection wells	Injection Zone(s):
Field Name PANOMA ** Side Two Must Be Completed.	ru ru
Confess Dit Dennit No	Ž
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul)	feet from DE/QW Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	☐ Haul-Off ☐ Workover O
Past Operator's License No. 5952 FLO 13V/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 Constants Linears No. 199900 C	Contact Person: Nancy Fitzwater JUL 0 3 2012
New Operator's License No. 33999 V New Operator's Name & Address Linn Operating, Inc.	Phone 281-840-4266
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser KCC WICHITA
Title Regulatory Compliance Advisor	Date 6/25/2012
	Signature <u>Mancy Fitzwaler</u>
Acknowledgment of Transfer: The above request for transfer of injection at 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 acknowledged as the new operator and may continue to inject fluids as authorized by Permits.	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	permitted by No.:
Date Authorized Signature	Date Authorized Signature
DIOTRIOT	PRODUCTION 8.14.12 UIC 844-12
DISTRICTEPRNew Ope	

Side Two Must Be Filed For All Wells

KDOR Lease No.:	207039 V				
*Lease Name:	STUCKY A	*Location:	18 23 36 NE		
Well No.	AP No. (YR DRLD/PRE '67)		n Section Line t from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
3	150932056800√	3960 FSL	1320 FEL	GAS	Producing
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+4		41,678	***		
					
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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.

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.: 203506 √
☑ Gas Lease: No. of Gas**	Lease Name: STUCKY A
□ Gas Gathering System:	<u>-SE</u> Sec <u>18</u> Twp <u>23S</u> R <u>36W</u> □E□W
□ Saltwater Disposal Well - Permit No∴	Legal Description of Lease: Sec. 18 23S 36W SE 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 **Side Two Must Be Completed.	
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 Haul-Off \square Workover \square Drilling
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	Contact Person:Lou Barry Room 3.142B WL-1 Phone281-366-7816 Date6/25/2012 Signature
Title Regulatory Supervisor	Signature Zou Surry RECEIVED
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 JUL 0 3 201, Phone 281-840-4266 Oil/Gas Purchaser KCC WICHIT
Title Regulatory Compliance Advisor	Signature Mancy Fitzwater
Acknowledgment of Transfer: The above request for transfer of injection au recorded in the records of the Kansas Corporation Commission. This acknowledges not convey any ownership interest in the above injection well(s) or pit permit is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action	dgment of transfer pertains to Kansas Corporation Commission records only and
Date Authorized Signature	Date Authorized Signature
DISTRICTEPR	PRODUCTIONUIC
Mail to: Past Operator New Ope	erator District

Side Two Must Be Filed For All Wells

KDOR Lease No.: 203506

NDON Lease No.	203300				
*Lease Name:	STUCKY A	*Location:	18 23 36 NW NV	N SE	
Well No.	AP No. (YR DRLD/PRE '67)		m Section Line t from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	150930012600	2640 FSL	2640 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.

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.: 219650
☑ Gas Lease: No. of Gas**	Lease Name: STUCKY A
□ Gas Gathering System:	<u>NW_</u> Sec_ <u>18_Twp23S_</u> R_ <u>36W_</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 18 23S 36W 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 Side Two Mass Se Completed:	
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul)	feet from □ N / □ S Line feet from □ E / □ W Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	☐ Haul-Off ☐ Workover ☐ Drilling
Past Operator's License No5952	Contact Person: Lou Barry Room 3.142B WL-1 Phone281-366-7816 Date6/25/2012 Signature
New Operator's License No	Contact Person: Nancy Fitzwater JUL 0 3 201
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
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 pern	
is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action	is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.:
Date	Date
Authorized Signature	Authorized Signature
DISTRICTEPR	PRODUCTIONUIC
Mail to: Past Operator New Op	erator District

Side Two Must Be Filed For All Wells

KDOR Lease No.:		P. Must be			
*Lease Name:	STUCKY A	*Location:	18 23 36 C NW		
Well No.	AP No. (YR DRLD/PRE '67)		n Section Line t from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
4HI	150932134600 🗸	3960 FSL	3960 FEL	GAS	Producing
					- management
 -					
					
	· 				

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

July 2010 Form Must be Typed Form Must be Signed OIL & GAS CONSERVATION DIVISION All blanks must be Filled

Form KSONA-1

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) I 1-1 (Transfer) 니다면-1 (Plugging Application)
OPERATOR: License # 5952 Name: BP America Production Company Address 1: P.O. Box 3092	Well Location:Sec. 18 Twp. 23S R. 36W □East ☑ West County:KEARNY
Address 2:	Lease Name: STUCKY 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, SE Sec. 18 23S 36W
Surface Owner Information:	When filing a Form T-1 involving multiple surface owners, attach an additional
Name: See Surface Owner Attachment Address 1:	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 re	athodic Protection Borehole Intent), you must supply the surface owners oads, 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
☑ I certify that, pursuant to the Kansas Surface Owner Notice	Act (House Bill 2032), I have provided the following to the surface JUL 0 3 2012 Plocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by CC WICHITA r, fax, and email address.
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 had 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 I, or Form CP-1 will be returned.
I hereby certify that the statements made herein are true and correct	t to the best of my knowledge and belief.
Date: June 25, 2012 Signature of Operator or Agent:	Lou Barry Title: Regulatory Supervisor

	GRABER, MARVIN J TRUST & GRABER, MARY A TRUST	HUSER, TODD & KIMME	MICHEL, VICTOR L & VIVIAN L TRUST	Name
	1202 EDWARDS	PO BOX 711	PO BOX 367	Address1
				Address2
DECEIVED.	LAKIN	SYRACUSE	LAKIN	City
RECEIVED JUL 0 3 2012	ß	KS	KS	State
KCC WICHITA	67860	67878	67860	ZIP
	18	18	18	Sec
	23	23	23	Twp
	36W	36W	36W	Rng