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.: 214948
	Lease Name: STURGEON E
□ Gas Gathering System:	<u>SW_Sec_14_Twp_28S_R_38W_</u>
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 14 28S 38W SW Qtr.
Spot Location:feet from □ N / □ S Line	3
feet from □ E / □ W Line	<u> </u>
☐ Enhanced Recovery Project Permit No.:	County: GRANT
Entire Project: ☐ Yes ☐ No	Production Zone(s):CHASE
Number of injection wells	Injection Zone(s): RECEIVED
Field NameHUGOTON	\ -
Company of the state of the sta	SEP 2 8 2012
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 Drilling
Past Operator's License No. 5952 Exp. 6/30/2 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 Operator's License No. <u>33999</u> ✓	Contact Person: Nancy Fitzwater JUL 0 3 2012
New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	
	Oil/Gas Purchaser Date 6/25/2012 KCC WICHITA
Title Regulatory Compliance Advisor	Signature Nancy Filzwater
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 permitted the properties of the Kansas Corporation Commission. This acknowledges not convey any ownership interest in the above injection well(s) or pit permitted the properties of the Kansas Corporation Commission.	•
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
DISTRICT EPR /0/2/12	PRODUCTION /0.3./2 UIC 10-3-12
Mail to: Past Operator New Op	

Side Two Must Be Filed For All Wells

KDOR Lease No.:	214948				
*Lease Name:	STURGEON E	*Location:	14 28 38 SW		
Well No.	AP No. (YR DRLD/PRE '67)	Footage from (i.e. FS:L = Feet		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
3HI	150672066700	1250 FSL	4030 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.

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Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, MUST be submitted with this form.

Che	eck Applicable Boxes:	Effective Date of	of Transfer: Jul	y 1, 2012	
	Oil Lease: No. of Oil Wells**	KS Dept of Rever	nue Lease No.:	20351	3 F
	Gas Lease: No. of Gas**	Lease Name:	STURGEON E		
	Gas Gathering System:	SE Se	c_14_Twp28S_R_3	38W □ E I	ωw
	Saltwater Disposal Well - Permit No.:		of Lease: Sec. 14		
	Spot Location:feet from □ N / □ S Line				
	feet from \square E / \square W Line				
	Enhanced Recovery Project Permit No.:	County: GF	RANT		
	Entire Project: ☐ Yes ☐ No		s):CHAS		
	Number of injection wells	İ			
Fiel	d NameHUGOTON	injection Zone(o).			
	face Pit Permit No. (API No. if Drill Pit. WO or Haul) Type of Pit: Emergency Burn Settling	☐ Haul-Off	feet from □ N / □ S feet from □ E / □ W □ Workover	/ Line	
Pas P.O Title	t Operator's License No	Phone281-366 Date6/25/20	Lou Barr	y	
Nev	Operator's Name & Address Linn Operating, Inc.	Phone <u>281-840</u>	Nancy Fitzwater 0-4266	KI	20 2012
	600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchasei Date 6/25/2012		<u> </u>	OC WICHITA
Title	Regulatory Compliance Advisor	Signature	Nancy Fitze		
the	nowledgment of Transfer: The above request for transfer of injection audited in the records of the Kansas Corporation Commission. This acknowles not convey any ownership interest in the above injection well(s) or pit perm is acknowledged as new operator and may continue to inject fluids as authorized by Permit	dgment of transfer perta it.		ation Comn	nission records only and a second sec
	. Recommended action	permitted by No.:			Ç 22 P.1
Date	Authorized Signature	Date		O'	
_			Author	rized Signa	ture
- 1	STRICTEPR New Ope	PRODUCTION	UIC Distr	rict	
	пол оро				

Side Two Must Be Filed For All Wells

KDOR Lease No.:	203513	<u></u>			
*Lease Name:	STURGEON E	*Location:	14 28 38 W2	W2 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)
1	150670051200 /	660 FSL	2640 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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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.

Che	eck Applicable Boxes:	Effective Date of Transfer:	مح July 1, 2012
	Oil Lease: No. of Oil Wells^*	KS Dept of Revenue Lease No.:	207046
◩	Gas Lease: No. of Gas**	Lease Name: STURGEON E	
	Gas Gathering System:	<u>E2 Sec 14 Twp 28S</u>	
	Saltwater Disposal Well - Permit No.:		-
	Spot Location:feet from □ N / □ S Line	Legal Description of Lease: <u>Sec</u>	2. 14 28S 38W E2
	feet from 🗆 E / 🗆 W Line	-	
	Enhanced Recovery Project Permit No.:	County: GRANT	
	Entire Project: ☐ Yes ☐ No	Production Zone(s):C	OUNCIL GROVE
	Number of injection wells	Injection Zone(s):	RECEIVE
Fiel	d NamePANOMA		KLCEIVED
			SEP 2 8 2012
Sur	face Pit Permit No.	feet from 🗆 N /	KOO
	(API No. if Drill Pit. WO or Haul)	feet from \Box E /	W Line
	ype of Pit: ☐ Emergency ☐ Burn ☐ Settling	☐ Haul-Off ☐ Workover	☐ Drilling
_			
	t Operator's License No. <u>5952</u> t Operator's Name & AddressBP America Production Company	Phone 281-366-7816	m 3.142B WL-1
	P. Box 3092, Houston, TX 77253	Date 6/25/2012	
Title	Regulatory Supervisor	Signature	vry
			RECEIVED
	v Operator's License No. 33999	Contact Person: Nancy Fitzwater	
	v Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	Phone <u>281-840-4266</u> Oil/Gas Purchaser	JUL_03 2012
	390 Travis, Odite 3100 Trodstori, 19xas 77002	Date 6/25/2012	
Title	Regulatory Compliance Advisor	Signature	ハしょこハハアムバティ
			The state of the s
	anowledgment of Transfer: The above request for transfer of injection at		
	orded in the records of the Kansas Corporation Commission. This acknowless not convey any ownership interest in the above injection well(s) or pit perm		rporation Commission records only and
doe	s not convey any ownership interest in the above injection well(s) or pit pern	III.	
	is acknowledged as		is acknowledged as
	new operator and may continue to inject fluids as authorized by Permit	the new operator of the above name	d lease containing the surface pit
ori	. Recommended action	permitted by No.:	
Date	Authorized Signature	Date A	uthorized Signature
D	ISTRICTEPR	PRODUCTION UIC	
	lail to: Past OperatorNew Ope		District

Side Two Must Be Filed For All Wells

Turned Studies Studies** Tuo and in the studies** Tupe of Well Well Status (PROD/TA'S/Abandoned) **Producing** Tupe of Well (Oil/Gas/INJ/WSW) (PROD/TA'S/Abandoned)	KDOR Lease No.:	207046				
(YR DRLD/PRE '67) (i.e. FS:L = Feet from South Line) (Oil/Gas/INJ/WSW) (PROD/TA'S/Abandoned) 2 150672016900 2590 FNL 1250 FEL GAS Producing	*Lease Name:	STURGEON E	*Location: _	14 28 38 E2		
	Well No.					
	2	150672016900	2590 FNL	1250 FEL	GAS	Producing
						·.
	\$ 10 B 3 C					

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 #	Well Location:
City: Houston State: Texas Zip: 77253 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: E2, SE, SW Sec. 14 28S 38W
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.
this form is being submitted with a Form C-1 (Intent) or CB-1	(Cathodic Protection Borehole Intent), you must supply the surface owners
nd the KCC with a plat showing the predicted locations of lea	ise roads, tank batteries, pipelines, and electrical lines. The locations shown is may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat
nd the KCC with a plat showing the predicted locations of lean the plat are preliminary non-binding estimates. The location hay be submitted. elect one of the following: I certify that, pursuant to the Kansas Surface Owner Not support (s) of the lead upon which the subject well in a resi	nse 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 REC plate. Detice Act (House Bill 2032), I have provided the following to the surface all be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required.
nd the KCC with a plat showing the predicted locations of learn the plat are preliminary non-binding estimates. The location has be submitted. elect one of the following: I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or with CP-1 that I am filing in connection with this form; 2) if the this form; and 3) my operator name, address, phone nuture. I have not provided this information to the surface owner the KCC will be required to send this information to the	nse 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 REC plate. Detice Act (House Bill 2032), I have provided the following to the surface all be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required.
Ind the KCC with a plat showing the predicted locations of learn the plat are preliminary non-binding estimates. The location has be submitted. Belect one of the following: I certify that, pursuant to the Kansas Surface Owner Nower(s) of the land upon which the subject well is or with CP-1 that I am filing in connection with this form; 2) if the this form; and 3) my operator name, address, phone nuture. I have not provided this information to the surface owner the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30.00.	Is a 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 REC potice Act (House Bill 2032), I have provided the following to the surface all be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required the form plat(s) required the plat(s) required the complex plat is a form C-1 or Form CB-1, the plat(s) required the plat(s). I acknowledge that, because I have not provided this information, surface owner(s). To mitigate the additional cost of the KCC performing to handling fee, payable to the KCC, which is enclosed with this form, the complex plates the plat is not received with this form, the complex plates and plates the plates and plates are plates and plates and plates are plates and plates a
Ind the KCC with a plat showing the predicted locations of learn the plat are preliminary non-binding estimates. The location has be submitted. Belect one of the following: I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or with CP-1 that I am filling in connection with this form; 2) if the this form; and 3) my operator name, address, phone nuture. I have not provided this information to the surface owner the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30.00 choosing the second option, submit payment of the \$30.00 choosing the second option, submit payment of the \$30.00 choosing the second option, submit payment of the \$30.00 choosing the second option, submit payment of the \$30.00 choosing the second option.	Ditice Act (House Bill 2032), I have provided the following to the surface before fill be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CB-1, the plat(s) required by mber, fax, and email address. Der(s). I acknowledge that, because I have not provided this information, surface owner(s). To mitigate the additional cost of the KCC performing to handling fee, payable to the KCC, which is enclosed with this form. Der(s) handling fee with this form. If the fee is not received with this form, the in T-1, or Form CP-1 will be returned.

SEP 2 8 2012 KCC WICHITA

Name	Address1	Address2	City	State	diZ	Sec	Q.M.L	Rng
SULLIVAN, M SHANE & MARY	3019 N RD G		ULYSSES	S	67880	14	78	38W
SCHARTZ LIVING TRUST ETAL	9341 E CALLE KUEHN	i	TUCSON	ΥZ	85715	14	28	38W
KENNEDY, WANDA M ETAL	PO BOX 1		ULYSSES	ĸs	67880	41	28	38W
HAMPTON, LYLE J & LINDA J	2364 N RD E		ULYSSES	ĸs	67880	41	28	38W
PATTON, MARCELLA L REV TRUST	929 N BAUGHMAN ST		ULYSSES	KS	67880	14	78	38W
LANCE, HAROLD A REV TRUST	937 N BAUGHMAN ST		ULYSSES	KS	67880	14	28	38W
THREE QUARTER FARMS	813 N STEVER ST		HIVSSES	¥,	67880	7	٩	2014/

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KCC WICHITA

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SEP 2 8 2612
KCC WICHITA