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	V /
☑ Gas Lease: No. of Gas**	KS Dept of Revenue Lease No.: 204157
☐ Gas Gathering System:	Lease Name: WILLITS, L.B. B
□ Saltwater Disposal Well - Permit No.:	<u>SE_</u> Sec_ <u>15_</u> Twp <u>26S_</u> R <u>38W_</u> □ E □ W
Spot Location:feet from □ N / □ S Line	Legal Description of Lease: Sec. 15 26S 38W SE Qtr.
feet from \square E / \square W Line	
☐ Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: KEARNY
Number of injection wells	Production Zone(s): CHASE
Field Name HUGOTON	Injection Zone(s):
** Side Two Must Be Completed.	
	- W
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul)	feet from D N / D S Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	———— feet from □ E / □ W Line tx □ Haul-Off □ Workover □ □ Drilling tx
Past Operator's License No. 5952 Exp le 35/12 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 DECENT
New Operator's License No. 33999 ✓ New Operator's Name & Address Linn Operating, Inc.	Contact Person: Nancy Fitzwater RECEIVED
600 Travis, Suite 5100 Houston, Texas 77002	Phone <u>281-840-4266</u> Oil/Gas Purchaser
Title Regulatory Compliance Advisor	Date 6/25/2012
	Signature Nancy Fitzwater KCC WICHITA
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 permission.	1
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	PRODUCTION <i>S. 30. 12</i> uic <u>8-30-12</u> erator 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.: _					
*Lease Name:		*Location:	15 26 38 NV	V NW SE	
Well No.	AP No. (YR DRLD/PRE '67)	Footage from S (i.e. FS:L = Feet fr	Section Line om South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	150930058800 /	2490 FSL	2490 FEL	GAS	Producing
				· · ji · · · · ·	

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.: 223521
☑ Gas Lease: No. of Gas**	Lease Name: WILLITS, L.B. B
☐ Gas Gathering System:	<u>- NE_</u> Sec_ <u>15_Twp26S_R_38W_</u> □ E □ W
☐ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 15 26S 38W NE Qtr.
Spot Location:feet from □ N / □ S Line	Sec. 15 265 38W NE Qtr.
feet from □ E / □ W Line	
☐ Enhanced Recovery Project Permit No.:	County KEADNY
Entire Project: ☐ Yes ☐ No	County: KEARNY Production Zone(s): COUNCIL ORDOVE
Number of injection wells	Production Zone(s): COUNCIL GROVE
Field NamePANOMA *** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul)	feet from □ N / □ S Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	feet from □ E / □ W Line □ Haul-Off □ Workover □ Drilling
Past Operator's License No5952 Past Operator's Name & Address	Contact Person:Lou Barry Room 3.142B WL-1 Phone281-366-7816 Date6/25/2012 Signature
New Operator's License No. 33999	Contact Person: Nancy Fitzwater RECEIVED
New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	Phone281-840-4266 Oil/Gas Purchaser
Title Regulatory Compliance Advisor	Date 0/23/2012
	Signature Mancy Filtzwater KCC WICHITA
Acknowledgment of Transfer: The above request for transfer of injection and recorded in the records of the Kansas Corporation Commission. This acknowledges not convey any ownership interest in the above injection well(s) or pit permitted.	uthorization, surface pit permit #has been noted, approved and duly edgment of transfer pertains to Kansas Corporation Commission records only and not.
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 Authorized Signature	Date Authorized Signature
DISTRICT EPR	PRODUCTIONUIC
Mail to: Past Operator New Ope	erator District

Side Two Must Be Filed For All Wells

7	,
 000501	

_ease Name:	WILLITS, L.B. B	*Location:	15 26 38 SV	V NE NE	
Well No.	AP No. (YR DRLD/PRE '67)	Footage from (i.e. FS:L = Feet f		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned
4	150932167400	1250 FNL	1250 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.

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**	
☑ Gas Lease: No. of Gas**	KS Dept of Revenue Lease No.: 218646
☐ Gas Gathering System:	Lease Name: WILLITS, L.B. B
□ Saltwater Disposal Well - Permit No.:	<u>-SE</u> Sec_15 Twp_26S_R_38W_□ E □ W
Spot Location:feet from □ N / □ S Line	Legal Description of Lease: Sec. 15 26S 38W SE Qtr.
feet from □ E / □ W Line	
☐ Enhanced Recovery Project Permit No.:	
Entire Project: ☐ Yes ☐ No	County: KEARNY
Number of injection wells	Production Zone(s):CHASE
Field Name HUGOTON ** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul)	feet from □ N / □ S Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	feet from ☐ E / ☐ W Line ☐ Haul-Off ☐ Workover ☐ 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 Title <u>Regulatory Supervisor</u>	Contact Person:Lou Barry Room 3.142B WL-1 Phone281-366-7816 Date6/25/2012 Signature
New Operator's License No. 33999	Contact Person: Nancy Fitzwater RECEIVED
New Operator's Name & Address <u>Linn Operating, Inc.</u> 600 Travis, Suite 5100 Houston, Texas 77002	Phone <u>281-840-4266</u>
Title Regulatory Compliance Advisor	Oil/Gas Purchaser
The Tregulatory Compliance Advisor	Signature Nancy Fitzwater KCC WICHITA
does not convey any ownership interest in the above injection well(s) or pit perm	uthorization, surface pit permit #has been noted, approved and duly edgment of transfer pertains to Kansas Corporation Commission records only and nit.
is acknowledged as he 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 Ope	

Side Two Must Be Filed For All Wells

KDOR Lease No.:	218646				
*Lease Name:		*Location	n:15 26 38 NV	V SE SE	
Well No.	AP No. (YR DRLD/PRE '67)	Footage from (i.e. FS:L = Feet	n Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
3HI	150932124000 🗸	1250 FSL	1250 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.

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.

OF	ERATOR: License #5952	Well Location:
Na	ne: BP America Production Company	
	ress 1: P.O. Box 3092	County: KEARNY
٩d	Iress 2:	Lease Name: WILLITS, L.B. B Well #:
Cit	r: Houston State: Texas Zip: 77253	
	ntact Person: DeAnn Smyers	If filling a Form T.1 for multiple wells on a loose enter the large
Ph	ne: (281) 366-4395 Fax: (281) 366-7836	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Εm	ail Address: <u>smyerscd@bp.com</u>	description of the lease below.
		SE, NE Sec. 15 26S 38W
Na Nde Nde	face Owner Information: ne:See Surface Owner Attachment lress 1: lress 2: State:Zip:	When filling 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.
th	e KCC with a plat showing the predicted locations of le	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
the the	e KCC with a plat showing the predicted locations of le plat are preliminary non-binding estimates. The locatio e submitted.	ase roads, tank batteries, pipelines, and electrical lines. The locations shown
d ti the ay t	e KCC with a plat showing the predicted locations of le plat are preliminary non-binding estimates. The locatio	ase roads, tank batteries, pipelines, and electrical lines. The locations shown ons may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat
nd ti n the ay t	e KCC with a plat showing the predicted locations of let plat are preliminary non-binding estimates. The location esubmitted. It one of the following: I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or we	RElatice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form JUL the form being filed is a Form C-1 or Form CB-1, the plat(s) required by
nd ti the ay t	the KCC with a plat showing the predicted locations of lear plat are preliminary non-binding estimates. The location is submitted. It one of the following: I certify that, pursuant to the Kansas Surface Owner Nowner(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 this form; and 3) my operator name, address, phone nutle have not provided this information to the surface own the KCC will be required to send this information to the	RElatice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form Julathe form being filed is a Form C-1 or Form CB-1, the plat(s) required by
od ti n the ay L	the KCC with a plat showing the predicted locations of lear plat are preliminary non-binding estimates. The location is submitted. It one of the following: I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or work CP-1 that I am filling in connection with this form; 2) if this form; and 3) my operator name, address, phone not have not provided this information to the surface own the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30.	RElatice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form JUL the form being filed is a Form C-1 or Form CB-1, the plat(s) required by amber, fax, and email address. **CCC** Der(s). I acknowledge that, because I have not provided this information, a 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, the plandling fee with this form. If the fee is not received with this form, the
cho	the KCC with a plat showing the predicted locations of lear plat are preliminary non-binding estimates. The location is submitted. It one of the following: I certify that, pursuant to the Kansas Surface Owner Nowner(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 this form; and 3) my operator name, address, phone not have not provided this information to the surface own the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30.00 psing the second option, submit payment of the \$30.00 psing the second option, submit payment of the \$30.00 psing the second option, submit payment of the \$30.00 psing the second option, submit payment of the \$30.00 psing the second option, submit payment of the \$30.00 psing the second option, submit payment of the \$30.00 psing the second option, submit payment of the \$30.00 psing the second option, submit payment of the \$40.00 psing the second option.	RElatice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form JUL the form being filed is a Form C-1 or Form CB-1, the plat(s) required by umber, fax, and email address. **CC** **CC** **Interpolation** **CC** **Interpolation** **Interpolation
cho	the KCC with a plat showing the predicted locations of lear plat are preliminary non-binding estimates. The location is submitted. It one of the following: I certify that, pursuant to the Kansas Surface Owner Nowner(s) of the land upon which the subject well is or work CP-1 that I am filling in connection with this form; 2) if this form; and 3) my operator name, address, phone nutles the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30. Soing the second option, submit payment of the \$30.00 A-1 form and the associated Form C-1, Form CB-1, Form by certify that the statements made herein are true and contents.	Relative Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form With form being filed is a Form C-1 or Form CB-1, the plat(s) required by umber, fax, and email address. **CC** **Ref of the form being filed is a Form C-1 or Form CB-1, the plat(s) required by umber, fax, and email address. **CC** **Ref of the form being filed is a Form C-1 or Form CB-1, the plat(s) required by umber, fax, and email address. **Ref of the form being filed is a Form C-1 or Form CB-1, the plat(s) required by umber, fax, and email address. **Ref of the form being filed is a Form C-1 or Form CB-1, the plat(s) required by umber, fax, and email address. **Ref of the form being filed is a Form C-1 or Form CB-1 will be returned. **Ref of the form CB-1 will be returned.**

Address1	Address2	City	State	ZIP	Sec	dw L	R D R
BO BOY 363						ļ	0
FO BOX 303		LAKIN	S	67860	15	26	38W

RECEIVED
JUL 0 3 2012
KCC WICHITA