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.

☐ Gas Cathering System: ☐ Gas Gathering System: ☐ Saftwater Disposal Well - Permit No: ☐ Spot Location:feet from □ N / □ S Line	Check Applicable Boxes:	Effective Date of Transfer: July 1, 2012
Gas Gathering System: Spot Location:	☐ Oil Lease: No. of Oil Wells**	KS Dept of Revenue Lease No.: 200238
Legal Description of Lease:Sec_4.27S.32W SW Qtr	☑ Gas Lease: No. of Gas**	Lease Name: <u>BAUGHMAN I</u>
□ Saltwater Disposal Well - Permit No.: Spot Location:feet from □ N / □ S Line	☐ Gas Gathering System:	<u>SW Sec_4 Twp_27S_R_32W</u> □ E □ W
Spot Location:feet from N / S Linefeet from E / W Line	□ Saltwater Disposal Well - Permit No.:	
Entire Project:	Spot Location:feet from □ N / □ S Line	
Injection Zone(s):	feet from D E / D W Line	
Injection Zone(s):	☐ Enhanced Recovery Project Permit No.:	County: HASKELLJ
Injection Zone(s):	Entire Project: ☐ Yes ☐ No	Production Zone(s): CHASE
Surface Pit Permit No. GAPI No. if Drill Pit. WC or Haul) feet from Drill Pit.	Number of injection wells	
Past Operator's License No. 5952 Exp (s/SV/12) Past Operator's Name & Address BP América Production Company P.O. Box 3992. Houston, TX 77253 Title Regulatory Supervisor New Operator's License No. 33999 New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002 Title Regulatory Compliance Advisor Contact Person: Nancy Fitzwater Phone 281-386-7816 Date 6/25/2012 Signature Low Barry Contact Person: Nancy Fitzwater Phone 281-840-4266 Oli/Gas Purchaser Date 6/25/2012 Signature Transfer: The above request for transfer of injection authorization, surface pit permit # has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does 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 Date		LO CO
Past Operator's License No. 5952 Explosion Past Operator's Name & Address BP America Production Company P.O. Box 3092. Houston, TX 77253 Title Regulatory Supervisor Signature Contact Person: Lou Barry Room 3.1428 WL-1 Phone 281-366-7816 Date 6/25/2012 Signature Contact Person: Name & Address Signature Contact Person: N	(API No. if Drill Pit. WO or Haul)	TI HAUI-Oπ TI WORKOVER □ DRINING .
New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002 Title Regulatory Compliance Advisor Title Regulatory Compliance Advisor Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #	Past Operator's Name & Address P América Production Company P.O. Box 3092, Houston, TX 77253	Contact Person: <u>Lou Barry Room 3.142B WL-1</u> Phone <u>281-366-7816</u> Date <u>6/25/2012</u>
recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.	New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	Phone281-840-4266 Oil/Gas Purchaser Date6/25/2012
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action Date Authorized Signature The new operator of the above named lease containing the surface pit permitted by No.: The new operator of the above named lease containing the surface pit permitted by No.: Authorized Signature	recorded in the records of the Kansas Corporation Commission. This acknowle	adgment of transfer pertains to Kansas Corporation Commission records only and
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action Date Authorized Signature The new operator of the above named lease containing the surface pit permitted by No.: Date Authorized Signature	is acknowledged as	is acknowledged as
Authorized Signature Authorized Signature	the new operator and may continue to inject fluids as authorized by Permit	•
Authorized Signature Authorized Signature		
DISTRICTEPR 10/17/12 PRODUCTION 10.18-12 UIC 10-18-12		Authorized Signature
Mail to: Past Operator		

Side Two Must Be Filed For All Wells

KDOR Lease No.	200238				
*Lease Name:	BAUGHMAN I	*Location:	4 27 32 NE N	E SW	
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)
1	150810010300 J	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

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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.: 219632
☑ Gas Lease: No. of Gas**	Lease Name: <u>BAUGHMAN I</u>
☐ Gas Gathering System:	<u>-NE_</u> Sec_4_Twp <u>_27S_</u> R_ <u>32W</u> _□ E □ W
□ Saltwater Disposal Weil - Permit No.:	Legal Description of Lease: Sec. 4 27S 32W NE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from \square E / \square W Line	
☐ Enhanced Recovery Project Permit No.:	County: HASKELL
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 \square 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 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 New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002 Title Regulatory Compliance Advisor	Contact Person: Nancy Fitzwater Phone 281-840-4266 Oil/Gas Purchaser Date 6/25/2012 Signature Tancy Titywater
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 perm	uthorization, surface pit permit #has been noted, approved and duly adgment of transfer pertains to Kansas Corporation Commission records only and it.
is acknowledged as 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	PRODUCTIONUICUIC
DISTRICTEPR	PRODUCTIONUIC
Mail to: Past Operator New Ope	eratorDistrict

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

Side Two Must Be Filed For All Wells

KDOR Lease No.:	219632				
*Lease Name:	BAUGHMAN I	*Location: _	4 27 32 SW N	IE 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)
2HI	150812083700 🗸	1250 FNL	1250 FEL	GAS	Producing
	107 ~ 20 4 4		778883		

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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) C	B-1 (Cathodic Protection Borehole Intent) ☑ T-1 (Transfer) ☐ CP-1 (Plugging Application)
OPERATOR: License #	Well Location:Sec. 4_Twp. 27S_R. 32W_□East ☑ West County:HASKELL
Address 2: City: Houston State: Texas Zip: 77253	Lease Name: BAUGHMAN I 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, SW Sec. 4 27S 32W
Surface Owner Information: Name: See Surface Owner Attachment Address 1: Address 2: City: State: Zip:	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.
may be submitted. Select one of the following:	ns may 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 No owner(s) of the land upon which the subject well is or w	otice Act (House Bill 2032), I have provided the following to the surface rill 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 by lamber, fax, and email address.
the KCC will be required to send this information to the	er(s). I acknowledge that, because I have not provided this information, 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.
If choosing the second option, submit payment of the \$30.00 KSONA-1 form and the associated Form C-1, Form CB-1, Form	0 handling fee with this form. If the fee is not received with this form, the n T-1, or Form CP-1 will be returned.
I hereby certify that the statements made herein are true and co	orrect to the best of my knowledge and belief.
Date: June 25, 2012 Signature of Operator or Ag	gent: Lou Barry Title: Regulatory Supervisor

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



Surface Owner Attachment

							ļ	/
Name	Address1	Address2	City	State	ZIP	Sec	Twp	6
HERITAGE FEEDERS LP	1506 RD 30		SUBLETTE	KS	67877	4	27	2
ECK, ROCHELLE & MARISHA TR	5665 N 3RD ST		GARDEN CITY	KS	67846	4	27	32/
ORRELL, DON & KENDA LOVING TRUST	53 PANORAMA CIRCLE	-	FLORISSANT	CO	80816-9088	4	27	32\
BLACKWELDER, ROCHELLE ECK	5665 N 3RD ST		GARDEN CITY	KS	67846	4	27	32

Sec Twp Cons.
4 27 Cow
4 27 32W
4 27 32W
4 27 32W