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.: 202970
☑ Gas Lease: No. of Gas **	
	Lease Name: NUSSER
☐ Gas Gathering System:	<u>SE_Sec_32_Twp_25S_R_32W</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 32 25S 32W SE 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	
Field Name HUGOTON	Injection Zone(s):
** Side Two Mast Be Completed.	
Surface Pit Permit No.	feet from □ N / □ S Line
(API No. if Drill Pit. WO or Haul)	feet from \square E / \square W Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	□ Haul-Off □ Workover 0 □ Drilling
Past Operator's License No. <u>5952</u> EXP 6/30// 2 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
Title Regulatory Supervisor	Signature Lou Barry
	RECEIVED
New Operator's License No. 33999	Contact Person: Nancy Fitzwater
New Operator's Name & Address Linn Operating, Inc.	Phone 281-840-4266 JUL 0 2 2012
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser
Title Regulatory Compliance Advisor	Contact Person: Nancy Fitzwater Phone281-840-4266
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 permitted.	authorization, surface pit permit #has been noted, approved and dedgment of transfer pertains to Kansas Corporation Commission records only a
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	Date
Authorized Signature	Authorized Signature
DISTRICTEPR_/0/29/12	PRODUCTION 10.3/12 UIC 10-30-12
Mail to: Past Operator New Op	perator District

Side Two Must Be Filed For All Wells

KDOR Lease No.: _	202970				
*Lease Name:	NUSSER	*Location:	32 25 32 NW NW	SE	
Well No.	AP No. (YR DRLD/PRE '67)	_	n Section Line trom South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	150550055000 /	2490 FSL	2490 FEL	GAS	Producing
	A 5-78-00 A 5-78-00				
		-			
- Lawrence -					
				The second second	<u></u>
-					
<u> </u>	- Logistation and				
					-
				- Address of the Control of the Cont	
					
A separate sheet may	y 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.: 218643
☑ Gas Lease: No. of Gas**	Lease Name: NUSSER
☐ Gas Gathering System:	<u>NW</u> Sec <u>32</u> Twp <u>25S</u> R <u>32W</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 32 25S 32W NW Qtr.
Spot Location:feet from □ N / □ S Line	
feet from \square E / \square 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	
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 Title <u>Regulatory Supervisor</u>	Contact Person: Lou Barry Room 3.142B WL-1 Phone 281-366-7816 Date 6/25/2012 Signature Lou Barry
New Operator's License No. 33999	Contact Person: Nancy Fitzwater
New Operator's Name & Address Linn Operating, Inc.	Phone 281-840-4266 JUL 0 2 2012
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser Date 6/25/2012 KCC WICHITA
Title Regulatory Compliance Advisor	Signature Nancy Pitzwater
	uthorization, surface pit permit #has been noted, approved and duledgment of transfer pertains to Kansas Corporation Commission records only annit. 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

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

Side Two Must Be Filed For All Wells

KDOR Lease No.:	218643				
*Lease Name:	NUSSER	*Location:	32 25 32 SW SE N	IW	
Well No.	AP No. (YR DRLD/PRE '67)	_	m Section Line at from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
2HI	150552105200	2733 FSL	3880 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.

Select the corresponding form being filed: C-1 (Intent)	CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)
ODEDATOR: License # 5050	Mall Leasting
OPERATOR: License # 5952	Well Location:
Name: BP America Production Company	Sec. <u>32</u> Twp. <u>25S</u> R. <u>32W</u> □East ☑ West County:FINNEY
Address 1: P.O. Box 3092 Address 2:	Lease Name: NUSSER Well #:
City: Houston State: Texas Zip: 77253	Lease Ivallie. NOSSEH VVell #.
Contact Person: DeAnn Smyers	
Phone: (281) 366-4395 Fax: (281) 366-7836	If filing a Form T-1 for multiple wells on a lease, enter the legal
Email Address: <u>smyerscd@bp.com</u>	description of the lease below:
Email Address. <u>Sinyerscowdp.com</u>	NW, SE Sec. 32 25S 32W
Surface Owner Information: Name: See Surface Owner Attachment	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
Address 1:	owner information can be found in the records of the register of deeds for the
Address 2:	county, and in the real estate property tax records of the county treasurer.
City: State: Zip:	
on the plat are preliminary non-binding estimates. The location may be submitted.	ase roads, tank batteries, pipelines, and electrical lines. The locations shown in may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat RECEIVED JUL 0 2 2012 lotice Act (House Bill 2032), I have provided the following to the surfackCC WICHITA
Select one of the following:	2 2012
☑ I certify that, pursuant to the Kansas Surface Owner N owner(s) of the land upon which the subject well is or w CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone number of the contraction of the contraction of the contraction of the contraction.	the form 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	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 \$30.0 KSONA-1 form and the associated Form C-1, Form CB-1, Form	00 handling fee with this form. If the fee is not received with this form, the m T-1, or Form CP-1 will be returned.
I hereby certify that the statements made herein are true and c	orrect to the best of my knowledge and belief.
Date: June 25, 2012 Signature of Operator or Aç	gent: Lou Barry Title: Regulatory Supervisor

Name	Address1	Address2	City	State	ZIP	Sec	Twp	Rng
J & C LIGHTNER INC	Attn: JOHN LIGHTNER	8955 S US HIGHWAY 83	GARDEN CITY	KS	67846-9462	32	25	32W
SCHEUCHZER, LAWRENCE L	8435 S COUNTY ROAD 15		GARDEN CITY	KS	67846-8807	32	25	32W
LIGHTNER, JOHN H & CYNTHIA A	8955 S US HIGHWAY 83		GARDEN CITY	KS	67846-9462	32	25	32W
PIONEER HI-BRED INTER INC	PO BOX 1039		WILMINGTON	DE	19899-1039	32	25	32W
NUSSER, MARTIN G REV TRUST	1735 E PARALLEL RD		GARDEN CITY	KS	67846-8945	32	25	32W

RECEIVED
JUL 0 2 2012
KCC WICHITA