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.: 203545  |
| ☑ Gas Lease: No. of Gas**   | Lease Name: <u>SCHWEER</u>  |
| □ Gas Gathering System:   | <u> SE Sec 30 Twp_ 23S R_32W</u> □ E □ W  |
| □ Saltwater Disposal Well - Permit No.:   | Legal Description of Lease: Sec. 30 23S 32W SE Qtr.   |
| ·   | Eegal Description of Edded.   |
| 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   | Injection Zone(s):  |
| Field NameHUGOTON SIde Two Must Se Completed:   |   |
| 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 □ Haul-Off □ Workover ✔  □ Drilling   |
| Past Operator's License No. 5952 Exp 1/36/12 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 Room 3.142B WL-1  Signature Lou Barry Room 3.142B WL-1  Example 19 |
|   | RECEIVED  |
| New Operator's License No. 33999  | Contact Person: Nancy Fitzwater   |
| New Operator's Name & Address Linn Operating, Inc.  | Phone 281-840-4266  Oil/Gas Burchaser   |
| 600 Travis, Suite 5100 Houston, Texas 77002   | Oil/Gas Purchaser   |
| Title Regulatory Compliance Advisor   | Oil/Gas Purchaser  Date 6/25/2012  KCC WICHITA  Signature Mancy Fitzwater   |
| 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 permits a cknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action | inuthorization, surface pit permit #has been noted, approved and duledgment of transfer pertains to Kansas Corporation Commission records only an init.             |
| DateAuthorized Signature  DISTRICTEPR///6//2  | DateAuthorized Signature  PRODUCTION  |
| Mail to: Past Operator New Op   |   |

### Side Two Must Be Filed For All Wells

| KDOH Lease No.: | 203545                      |            |                                      |                                   |                                      |
|-----------------|-----------------------------|------------|--------------------------------------|-----------------------------------|--------------------------------------|
| *Lease Name:    | SCHWEER                     | *Location: | 30 23 32 NE NW                       | V NW SE                           |                                      |
| Well No.        | AP No.<br>(YR DRLD/PRE '67) |            | n Section Line<br>t from South Line) | Type of Well<br>(Oil/Gas/INJ/WSW) | Well Status<br>(PROD/TA'S/Abandoned) |
| 1               | 150550078000 /              | 2600 FSL   | 2145 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.

# 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 #         5952           Name:         BP America Production Company  | Well Location:Sec. <u>30</u> Twp. <u>23S</u> R. <u>32W</u> □East ☑ ₩est   |                     |
|---|---|---------------------|
| Address 1: P.O. Box 3092  | County: FINNEY  |                     |
| Address 2:  | Lease Name: SCHWEER Well #:   |                     |
| City: Houston State: Texas Zip: 77253   |   |                     |
| Contact Person: DeAnn Smyers  | If filing a Form T-1 for multiple wells on a lease, enter the legal   |                     |
| Phone: (281) 366-4395 Fax: (281) 366-7836   | description of the lease below:   |                     |
| Email Address: <u>smyerscd@bp.com</u>   | SE Sec. 30 23S 32W  |                     |
| 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  |                     |
| Address 2:  | county, and in the real estate property tax records of the county treasurer.  |                     |
| City: State: Zip:   |   |                     |
|   | ase roads, tank batteries, pipelines, and electrical lines. The locations shown<br>ns may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat   |                     |
| n the plat are preliminary non-binding estimates. The location  |   |                     |
| n the plat are preliminary non-binding estimates. The location ay be submitted.   |   |                     |
| n the plat are preliminary non-binding estimates. The location ay be submitted.  elect one of the following:  | otice Act (House Bill 2032). I have provided the following to the surface   | EIVE                |
| n the plat are preliminary non-binding estimates. The location ay be submitted.  elect one of the following:  | ns may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat  | EIVE<br>2 20<br>CHI |
| n 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 Nowner(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 nu  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.  | 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 mber, fax, and email address.  JUL 0  With this form. If the fee is not received with this form, the  | EIVE<br>2 20<br>CHI |
| the plat are preliminary non-binding estimates. The location ay be submitted.  Plect 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 CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone nu  ☐ 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 \$30.00.00 | otice Act (House Bill 2032), I have provided the following to the surface fill 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 mber, fax, and email address.  JUL 0 a surface owner(s). To mitigate the additional cost of the KCC performing the KCC performing to the KCC, which is enclosed with this form. | EIVE<br>2 20<br>CHI |

| Name                  | Address1             | Address2        | City          | State | ZIP        | Sec | Twp | Rng |
|-----------------------|----------------------|-----------------|---------------|-------|------------|-----|-----|-----|
| GILLAN, DOUGLAS C     | 12425 SE 223RD DR    |                 | KENT          | WA    | 98031-9686 | 30  | 23  | 32W |
| GILLAN, DOUGLAS C     | 7683 SE 27TH ST      | APT 230         | MERCER ISLAND | WA    | 98040-2804 | 30  | 23  | 32W |
| GILLAN FAMILY TRUST   | 5539 21ST AVE        |                 | SACRAMENTO    | CA    | 95820-5503 | 30  | 23  | 32W |
| GILLAN FAMILY TRUST   | 2024 SANTA LUCIA WAY |                 | CARMICHAEL    | CA    | 95608-5633 | 30  | 23  | 32W |
| DOUGHERTY, JAMES EARL | 5115 N VFW RD        |                 | GARDEN CITY   | KS    | 67846-7010 | 30  | 23  | 32W |
| GILLAN, FRANCES D     | 5120 N US HIGHWAY 83 |                 | GARDEN CITY   | KS    | 67846-9687 | 30  | 23  | 32W |
| FUQUA, ARLENE R       | Attn: LYDIA SCHWEER  | 8343 DANBURY LN | HUDSON        | FL    | 34667-6527 | 30  | 23  | 32W |
| SCHWEER, LYDIA TRUST  | 8343 DANBURY LN      |                 | HUDSON        | FL    | 34667-6527 | 30  | 23  | 32W |

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JUL 0 2 2012
KCC WICHITA

