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.

Che	eck Applicable Boxes:	Effective Date of Transfer: July 1, 2012
	Oil Lease: No. of Oil Wells**	KS Dept of Revenue Lease No.: 204201
Ø	Gas Lease: No. of Gas **	Lease Name: WOOD, EMMA B
	Gas Gathering System:	·
	Saltwater Disposal Well - Permit No.:	NE_Sec_34_Twp_24S_R_32W_□E□W
_		Legal Description of Lease: Sec. 34 24S 32W NE 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	Injection Zone(s):
Fiel	d NameHUGOTON	injection zone(s).
Sur	face Pit Permit No.	feet from □ N / □ S Line
	(API No. if Drill Pit. WO or Haul)	feet from DE/DW Line
<u></u>	ype of Pit: ☐ Emergency ☐ Burn ☐ Settling	□ Haul-Off □ Workover v_{ℓ} □ Drilling
Pas P.O	t Operator's License No5952	Contact Person: Lou Barry Room 3.142B WL-1 Phone 281-366-7816 Date 6/25/2012 Signature Lou Barry RECEIVED
Nev	v Operator's License No. 33999	Contact Person: Nancy Fitzwater
Nev	Operator's Name & Address Linn Operating, Inc.	Phone 281-840-4266 30L U 2 2012
	600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas PurchaserKCC IAu a
Title	Regulatory Compliance Advisor	Oil/Gas Purchaser Date6/25/2012
reco	orded in the records of the Kansas Corporation Commission. This acknowled is not convey any ownership interest in the above injection well(s) or pit permi	1
	is acknowledged as new operator and may continue to inject fluids as authorized by Permit	is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.:
Date	e	Date
	Authorized Signature	Authorized Signature
D	ISTRICTEPR /0/15/12	PRODUCTION 10.16.12.uic 10-16-12
	ail to: Past Operator New Ope	

Side Two Must Be Filed For All Wells

KDOR Lease No.:	204201				
*Lease Name:	WOOD, EMMA B	*Location	on: <u>34 24 32 C</u>	NE NE	
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	150550086500/	3960 FSL	1320 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.

OPERATOR: License #5952	Well Location:
Name: BP America Production Company	Sec. <u>34</u> Twp. <u>24S</u> R. <u>32W</u> □East ☑ West
Address 1: P.O. Box 3092	County: FINNEY
Address 2:	Lease Name: WOOD, EMMA B 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: smyerscd@bp.com	description of the lease below.
	NE Sec. 34 24S 32W
Surface Owner Information:	When filing a Form T-1 involving multiple surface owners, attach an additional
Name: See Surface Owner Attachment	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:	
and the KCC with a plat showing the predicted locations of lo on the plat are preliminary non-binding estimates. The locati	3-1 (Cathodic Protection Borehole Intent), you must supply the surface owners ease roads, tank batteries, pipelines, and electrical lines. The locations shown ions may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat
and the KCC with a plat showing the predicted locations of le	ease roads, tank batteries, pipelines, and electrical lines. The locations shown ions may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat
and the KCC with a plat showing the predicted locations of location on the plat are preliminary non-binding estimates. The location may be submitted. Select one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or	PRECEIVE Notice 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 0 2 20
and the KCC with a plat showing the predicted locations of keep on the plat are preliminary non-binding estimates. The location may be submitted. Select one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or CP-1 that I am filling in connection with this form; 2) if this form; and 3) my operator name, address, phone in I have not provided this information to the surface ow the KCC will be required to send this information to the	Pease roads, tank batteries, pipelines, and electrical lines. The locations shown from may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat. Notice 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 form filed is a Form C-1 or Form CB-1, the plat(s) required by
and the KCC with a plat showing the predicted locations of keep on the plat are preliminary non-binding estimates. The locationary be submitted. Select one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or CP-1 that I am filling in connection with this form; 2) if this form; and 3) my operator name, address, phone in I have not provided this information to the surface ow the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30. If choosing the second option, submit payment of the \$30.	RECEIVE Notice 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 of the form being filed is a Form C-1 or Form CB-1, the plat(s) required by Form CH-1, and email address. **RECEIVE** WICH** RECEIVE** JUL 0 2 20 **RECEIVE**
and the KCC with a plat showing the predicted locations of ke on the plat are preliminary non-binding estimates. The location may be submitted. Select one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if this form; and 3) my operator name, address, phone in I have not provided this information to the surface ow the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30.	Notice 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 of the form being filed is a Form C-1 or Form CB-1, the plat(s) required by furniber, fax, and email address. **KCC WICH** **RECEIVE** **Notice 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 of the form being filed is a Form C-1 or Form CB-1, the plat(s) required by furniber, fax, and email address. **KCC WICH** **CO WICH** **RECEIVE** **JUL 0 2 20 **KCC WICH** **Notice Act (House Bill 2032), I have provided the following to the surface of the form of the for

Name	ne	Address1	Address2	City	State	ZIP	Sec	Twp	Rng
DAN	MME WILLIAM H & ERMA C FARMS LLC	PO BOX 36		TALMAGE	NE	68448-0036	34	24	32W
DAN	MME WILLIAM H & ERMA C FARMS LLC	PO BOX 36		TALMAGE	NE	68448-0036	34	24	_

RECEIVED
JUL 0 2 2012
KCC WICHITA