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.: 224084
☑ Gas Lease: No. of Gas**	Lease Name: JOHNSON
□ Gas Gathering System:	<u>-SW</u> Sec_31_Twp_23S_R_33W_□E□W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 31 23S 33W SW 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):COUNCIL GROVE
Number of injection wells	Injection Zone(s):
Field NamePANOMA	
Surface Pit Permit No. (API No. if Drill Pit. WO or Haul)	feet from \square N / \square S Line
☐ Type of Pit: ☐ Emergency ☐ Burn ☐ Settling	
Past Operator's License No5952	Phone 281-366-7816 Date 6/25/2012 Signature RECEIVED Contact Person: Nancy Fitzwater
Title Regulatory Compliance Advisor	Date 6/25/2012 NCC WICHITA Signature Nancy Fitzwaler
recorded in the records of the Kansas Corporation Commission. This a does not convey any ownership interest in the above injection well(s) or is acknowledgen the new operator and may continue to inject fluids as authorized by	ged as is acknowledged as
No.: Recommended action	permitted by No.:
Date Authorized Signature	DateAuthorized Signature
DISTRICT EPR ///27/12	PRODUCTION 4. 28.12 UIC 11-28-12
Mail to: Past Operator	New Operator District

Side Two Must Be Filed For All Wells

KDOR Lease No.:	224084		Flied For All Well		
*Lease Name:		*Location:	31 23 33 NE SE	<u>sw</u>	
Well No.	AP No. (YR DRLD/PRE '67)	_	n Section Line t from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
3	150552177600 (1028 FSL	2470 FWL	GAS	Producing
	**				
				ing the off	· · · · · · · · · · · · · · · · · · ·
* .					

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.

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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.: 202033
☑ Gas Lease: No. of Gas**	Lease Name: <u>JOHNSON</u>
☐ Gas Gathering System:	<u>NW_</u> Sec_31_Twp23S_R_33W_ □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 31 23S 33W NW 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):
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 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 New Operator's Name & Address Linn Operating, Inc. 600 Travis, Suite 5100 Houston, Texas 77002	Contact Person: Nancy Fitzwater
Title Regulatory Compliance Advisor	Date 6/25/2012
recorded in the records of the Kansas Corporation Commission. This acknow does not convey any ownership interest in the above injection well(s) or pit per	•
is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action	
Date Authorized Signature	DateAuthorized Signature
DISTRICTEPR	PRODUCTIONUIC perator District

Side Two Must Be Filed For All Wells

KDOR Lease No.:	202033	<u> </u>			
*Lease Name:	JOHNSON	*Location:	31 23 33 SE SE	NW	
Well No.	AP No. (YR DRLD/PRE '67)		n Section Line t from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	150550037000 /	2640 FSL	2640 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.

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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: Ju	م الا الا الا الا الا الا الا الا الا ال
□ Oil Lease: No. of Oil Wells	KS Dept of Reve	nue Lease No.:	218127
☑ Gas Lease: No. of Gas**	Lease Name:	JOHNSON	
☐ Gas Gathering System:	<u>SE_</u> Se	ec <u>31</u> Twp <u>23S</u> R	<u>33W</u> □ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description	n of Lease: <u>Sec. 3</u>	1 23S 33W SE Qtr.
Spot Location:feet from □ N / □ S Line			
feet from □ E / □ W Line			
☐ Enhanced Recovery Project Permit No.:	County:F	INNEY	
Entire Project: ☐ Yes ☐ No	Production Zone((s): <u>CHA</u>	SE
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 Set	ttling Haul-Off	feet from □ N / □ feet from □ E / □ □ Workover	W Line
Past Operator's License No. <u>5952</u> Past Operator's Name & AddressBP America Production Corp.O. Box 3092, Houston, TX 77253 TitleRegulatory Supervisor	<u>Ompany</u> Phone <u>281-36</u> Date <u>6/25/20</u>	66-7816	•
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	Phone <u>281-84</u> Oil/Gas Purchase Date <u>6/25/201</u> :	Nancy Fitzwater 40-4266 er 2 Nancy Fitzwater	JOT 0 5 5015
Acknowledgment of Transfer: The above request for transfer or recorded in the records of the Kansas Corporation Commission. To does not convey any ownership interest in the above injection well (his acknowledgment of transfer per		has been noted, approved and d u
is acknown the new operator and may continue to inject fluids as authorized No.: Recommended action			is acknowledged as ease containing the surface pit
Date Authorized Signature	Date	Auth	orized Signature
	BBODUOTION		
DISTRICTEPR	PRODUCTION New Operator	UIC Di:	strict

Side Two Must Be Filed For All Wells

KDOR Lease No.:	218127				
*Lease Name:	JOHNSON	*Location:	31 23 33 SW NE	SE	
Well No.:	AP No. (YR DRLD/PRE '67)		n Section Line t from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
2HI	150552098100 /	1380 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.

OPERATOR: License # 5952	Well Location:
Name: BP America Production Company	
Address 1: P.O. Box 3092	Sec. <u>31</u> Twp. <u>23S</u> R. <u>33W</u> □East ☑ ₩est County:FINNEY
Address 2:	County:FINNEY Lease Name:JOHNSON
City: Houston State: Texas Zip: 77253	Lease Name. Johnson Well #.
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	NW, SE, SW Sec. 31 23S 33W
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:	
and the KCC with a plat showing the predicted locations of lea	-1 (Cathodic Protection Borehole Intent), you must supply the surface owners 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
and the KCC with a plat showing the predicted locations of lea	ase roads, tank batteries, pipelines, and electrical lines. The locations shown
and the KCC with a plat showing the predicted locations of lea	ase roads, tank batteries, pipelines, and electrical lines. The locations shown
and the KCC with a plat showing the predicted locations of lea	ase roads, tank batteries, pipelines, and electrical lines. The locations shown and may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat RECEIVEL JUL 0 2 2012 lotice 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 CC WICHITZ the form being 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 lead 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 Nowner(s) of the land upon which the subject well is or wowner(s) of the land upon which the subject well is or wowner(s) and 3) my operator name, address, phone nutering the kCC will be required to send this information to the	ase roads, tank batteries, pipelines, and electrical lines. The locations shown and may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat RECEIVEL JUL 0 2 2012 lotice 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 CC WICHITZ the form being 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 lead 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 Nowner(s) of the land upon which the subject well is or worder. The CP-1 that I am filing in connection with this form; 2) if the this form; and 3) my operator name, address, phone nowner I 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 of the second option, submit payment of the \$30.00 of the second option, submit payment of the \$30.00 of the second option, submit payment of the \$30.00 of the second option, submit payment of the \$30.00 of the second option, submit payment of the \$30.00 of the second option, submit payment of the second option.	lotice 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 CH the form being filed is a Form C-1 or Form CB-1, the plat(s) required by amber, fax, and email address. I acknowledge that, because I have not provided this information, a surface owner(s). To mitigate the additional cost of the KCC performing to handling fee, payable to the KCC, which is enclosed with this form, the
and the KCC with a plat showing the predicted locations of lead 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 Nowner(s) of the land upon which the subject well is or worked that I am filling in connection with this form; 2) if the this form; and 3) my operator name, address, phone now the KCC will be required to send this information to the this task, I acknowledge that I am being charged a \$30.	lotice 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, the plat(s) required by lumber, fax, and email address. Interception of the KCC, which is enclosed with this form. In the form CP-1 will be returned.

Name	Address1	Address2	City	State	diZ	Sec	Twp	Rng
SMITH, KRISTOPHER V	1111 SAFFORD AVE		GARDEN CITY	KS	67846-4827	31	23	33W
SYMMONDS, JAMES M & MARTHA L	6920 LYLE RD		HOLCOMB	KS	67851-9041	31	23	33W
IONG, JEREMY R	6900 LYLE RD		HOLCOMB	KS	67851-9041	31	23	33W
ROTH, JENNIFER L	6910 LYLE RD		HOLCOMB	KS	67851-9041	31	23	33W
VINE, LINDA FOX	PO BOX 1372		HAYS	KS	67601-8372	31	23	33W
PETERS, TIMOTHY S	6935 JOSS RD		HOLCOMB	KS	67851-8982	31	23	33W
VAGHER, GAYLEN J & CINDALEA	7005 JOSS RD		HOLCOMB	KS	67851-8948	31	23	33W
THORNE, MICHAEL	7085 JOSS RD		HOLCOMB	KS	67851-8948	31	23	33W
SAUVAIN, KENNETH W & MELANEY R	7145 JOSS RD		HOLCOMB	KS	67851-8985	31	23	33W
BENNETT, RICHARD M & MARY ANN	4070 N BIG LOWE RD		HOLCOMB	KS	67851-9109	31	23	33W
WISHON, RAYMOND JR & OPAL	PO BOX 326		HOLCOMB	KS	67851-0326	31	23	33W
DOTY, ALVIN A J & REBECCA J	1209 BUFFALO JONES AVE		GARDENCITY	KS	67846-4833	31	23	33W
DUCHARME, JIM R	6960 JOSS ROAD		HOLCOMB	KS	67851-8982	31	23	33W
REGAN, MICHAEL L & CHRISTINE A	6735 LYLE RD		HOLCOMB	KS	67851-9114	31	23	33W
ROWLEY, ROBERT L & ARLENE M	PO BOX 401		HOLCOMB	KS	67851-0401	31	23	33W
HIPP, FRANK J & JANICE L	PO BOX 142		HOLCOMB	KS	67851-0142	31	23	33W
RAMIREZ, FEDERICO	6875 LYLE RD		HOLCOMB	KS	67851-9038	31	23	33W
ANGUIANO, JUAN V	PO BOX 284		HOLCOMB	KS	67851-0284	31	23	33W
MARTINEZ, HERMELINDO & MARIA	1947 ROAD Z		DEERFIELD	KS	67838-3844	31	23	33W
KRAMER, CHARLOTTE M	PO BOX 403		HOLCOMB	KS	67851-0403	31	23	33W
JEFFERSON, DONALD C & VIRGINIA L	7165 LYLE RD		HOLCOMB	KS	67851-9042	31	23	33W
GRIFFIN, AMY M	901 N 1ST ST		GARDEN CITY	KS	67846-5814	31	23	33W
DREILING, DONALD & BERNETHA	PO BOX 255		HOLCOMB	KS	67851-0255	31	23	33W
FENTON, KEVIN L & CINDY L	PO BOX 347		HOLCOMB	KS	67851-0347	31	23	33W
SIX M FARMS INC	9715 W MILIER RD		HOLCOMB	KS	67851-9044	31	23	33W
BECKER, ALFRED L	6890 LYLE RD		HOLCOMB	KS	67851-9039	31	23	33W
MOREHOUSE, BOB	Attn: SHELLIE MOREHOUSE	6890 LYLE RD	HOLCOMB	KS	67851-9058	31	23	33W
GREEN, ARTHUR			HOLCOME	KS	67851-9038	31	23	33W
LARSON, ANDREW E SR. TRUST dated 12/31/10	3510 N LITTLE LOWE RD		GARDEN CITY	KS	67846-9781	31	23	33W
BRAUN, HOWARD J & SHARON K	1402 MELS DR		GARDEN CITY	KS	67846-3364	31	23	33W
WRIGHT LLC	4103 E HIGHWAY 50		GARDEN CITY	KS	67846-8302	31	23	33W
DAVIS, JAMES M & CRUSELIA	PO BOX 290		HOLCOMB	KS	67851-0290	31	23	33W
OROZCO, DANIEL L & THERESA F	PO BOX 922		HOLCOMB	KS	67851-0922	31	23	33W
FLORES, BENJAMIN S & DINA V	526 GARDEN ST		GARDEN CITY	KS	67846-8392	31	23	33W
SCHOBERT, STEVEN W & PATTI LEE	6720 LYLE RD		HOLCOMB	KS	67851-9038	31	23	33W
MUNOZ, JOSE G	3625 N LITTLE LOWE RD		HOLCOMB	KS	67851-8960	31	23	33W
MUNOZ, JOSE G	PO BOX 110		ногсомв	ĸs	67851-0110	31	23	33W
	- Carrier Control of the Control of							1

RECEIVED JUL 0 2 2012 KCC WICHITA