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.: 202021
☑ Gas Lease: No. of Gas**	Lease Name: JONES B
☐ Gas Gathering System:	<u>NE_Sec_30_Twp29S_R_39W_</u> □E□W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 30 29S 39W NE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	t
☐ Enhanced Recovery Project Permit No.:	County: STANTON
Entire Project:	Production Zone(s): CHASE
Number of injection wells	Injection Zone(s):
Field Name HUGOTON Side Two Mass & 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 \bigcap \bigcap Drilling
Past Operator's License No5952	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 JUL 0 2 2012 Phone 281-840-4266 Oil/Gas Purchaser KCC WICHITA
Title Regulatory Compliance Advisor	Signature
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 is acknowledged as the new operator and may continue to inject fluids as authorized by Permits.	is acknowledged as
No.: Recommended action	permitted by No.:
Date Authorized Signature	Authorized Signature
DISTRICT EPR ///27//2 Mail to: Past Operator New Op	PRODUCTION 14.28.12 UIC 11-28-12 Derator District

Side Two Must Be Filed For All Wells

KDOR Lease No.:	202021	!			
*Lease Name:	JONES B	*Location:	30 29 39 SW SW	NE	
Well No.	AP No. (YR DRLD/PRE '67)		m Section Line t from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
1	151870020500 /	2640 FSL	2640 FEL	GAS	Producing
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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.

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Form T-1

March 2010

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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.: 217846
☑ Gas Lease: No. of Gas**	Lease Name: JONES B
☐ Gas Gathering System:	<u>NE_Sec_30_Twp_29S_R_39W</u> □E□W
☐ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 30 29S 39W NE Qtr.
Spot Location:feet from □ N / □ S Line	
feet from □ E / □ W Line	
☐ Enhanced Recovery Project Permit No.:	County: STANTON
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:
New Operator's License No. <u>33999</u> New Operator's Name & Address <u>Linn Operating, Inc.</u>	Contact Person: Nancy Fitzwater JUL 0 2 2012 Phone 281-840-4266
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas PurchaserKCO 14110
Title Regulatory Compliance Advisor	Oil/Gas Purchaser Date 6/25/2012 Signature Nancy Titywater
recorded in the records of the Kansas Corporation Commission. This acknown 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	the new operator of the above named lease containing the surface pit
No.: Recommended action	permitted by No.:
Date Authorized Signature	Authorized Signature
DISTRICTEPRNew O	PRODUCTIONUIC perator District
Mail to: Past Operator New O	PolatolDistrict

Side Two Must Be Filed For All Wells

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KDOR Lease No.:	217846		-		
*Lease Name:	JONES B	*Location:	30 29 39 NE SW N	NE	
Well No.	AP No. (YR DRLD/PRE '67)		m Section Line et from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
3HI	151872060200 /	3930 FSL	1350 FEL	GAS	Producing
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Address .					
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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 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.: 206843
☑ Gas Lease: No. of Gas**	Lease Name: JONES B
☐ Gas Gathering System:	E2_Sec_30_Twp29S_R_39W_□ E □ W
□ Saltwater Disposal Well - Permit No.:	Legal Description of Lease: Sec. 30 29S 39W E2
Spot Location:feet from □ N / □ S Line	
•	
feet from \square E / \square W Line	
☐ Enhanced Recovery Project Permit No.:	County: STANTON
Entire Project: ☐ Yes ☐ No	Production Zone(s):COUNCIL GROVE
Number of injection wells	Injection Zone(s):
Field Name PANOMA 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 P.O. Box 3092, Houston, TX 77253 Title <u>Regulatory Supervisor</u></u>	Contact Person:
New Operator's License No. 33999	Contact Person: Nancy Fitzwater
New Operator's Name & Address Linn Operating, Inc.	Phone 281-840-4266
600 Travis, Suite 5100 Houston, Texas 77002	Oil/Gas Purchaser KCC WICLITA
Title Regulatory Compliance Advisor	Signature Nancy Pitzwater
Acknowledgment of Transfer: The above request for transfer of injection recorded in the records of the Kansas Corporation Commission. This acknowledges not convey any ownership interest in the above injection well(s) or pit per is acknowledged at the new operator and may continue to inject fluids as authorized by Perm No.: Recommended action	s is acknowledged as
	- PROPUSTION IIIO
DISTRICTEPRNew C	PRODUCTIONUIC

Side Two Must Be Filed For All Wells

KDOR Lease No.:	206843		_		
*Lease Name:	JONES B	*Location:	30 29 39 C E2	**************************************	
Well No.	AP No. (YR DRLD/PRE '67)		om Section Line et from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'S/Abandoned)
2	151872008400 /	2590 FNL	1250 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	Well Location:
Name: BP America Production Company	Sec. <u>30</u> Twp. <u>29S</u> R. <u>39W</u> □East ☑ West
Address 1: P.O. Box 3092	County: STANTON
Address 2:	Lease Name: JONES 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 leader bolon.
	NE, E2 Sec. 30 29S 39W
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:	county, and in the roal coldes properly tall receives a residence of the second
this form is being submitted with a Form C 1 (Intent) or CR 1	
	(Cathodic Protection Borehole Intent), you must supply the surface owners se roads, tank batteries, pipelines, and electrical lines. The locations shown
	se roads, tank batteries, pipelines, and electrical lines. The locations shown is may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat.
nd the KCC with a plat showing the predicted locations of leas n the plat are preliminary non-binding estimates. The locations nay be submitted.	se roads, tank batteries, pipelines, and electrical lines. The locations shown is may be entered on the Form C-1 plat, Form CB-1 plat, or a separate placEEIVEI
nd the KCC with a plat showing the predicted locations of lease in the plat are preliminary non-binding estimates. The locations have be submitted. Select one of the following: I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will	se roads, tank batteries, pipelines, and electrical lines. The locations shown is may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat FCEIVEI JUL 0 2 20 tice Act (House Bill 2032), I have provided the following to the surface WICHI be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form e form being filed is a Form C-1 or Form CB-1, the plat(s) required by
Ind the KCC with a plat showing the predicted locations of lease in the plat are preliminary non-binding estimates. The locations have be submitted. It certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the this form; and 3) my operator name, address, phone num I have not provided this information to the surface owner the KCC will be required to send this information to the si	se roads, tank batteries, pipelines, and electrical lines. The locations shown is may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat FCEIVEI JUL 0 2 20 tice Act (House Bill 2032), I have provided the following to the surface WICHI be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form e form being filed is a Form C-1 or Form CB-1, the plat(s) required by
Ind the KCC with a plat showing the predicted locations of lease in the plat are preliminary non-binding estimates. The locations have be submitted. **Belect one of the following:** I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filling in connection with this form; 2) if the this form; and 3) my operator name, address, phone num I have not provided this information to the surface owner the KCC will be required to send this information to the strike task, I acknowledge that I am being charged a \$30.00 for choosing the second option, submit payment of the \$30.00	se roads, tank batteries, pipelines, and electrical lines. The locations shown is may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plate LUL 0 2 20 tice Act (House Bill 2032), I have provided the following to the surface WICHI 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 abor, fax, and email address. In acknowledge that, because I have not provided this information, 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. I handling fee with this form. If the fee is not received with this form, the
and the KCC with a plat showing the predicted locations of lease in the plat are preliminary non-binding estimates. The locations have be submitted. Select one of the following: ☐ I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the this form; and 3) my operator name, address, phone num ☐ I have not provided this information to the surface owner the KCC will be required to send this information to the sithis task, I acknowledge that I am being charged a \$30.00	se roads, tank batteries, pipelines, and electrical lines. The locations shown is may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat CEIVEL JUL 02 20 tice Act (House Bill 2032), I have provided the following to the surface WICHI 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 inbor, fax, and email address. In acknowledge that, because I have not provided this information, 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. In handling fee with this form. If the fee is not received with this form, the T-1, or Form CP-1 will be returned.

Name	Address1	Address2	City	State	dIZ	Sec	Twp	Rng
HICKEY MEI ANIF	1600 S MONROE		HUGOTON	KS	67951	30	29	39W
RELL DOLIGIAS E. RENELL M	1 FORD DR		COLBY	KS	67701	30	52	39W

RECEIVED JUL 0 2 2012 KCC WICHITA