

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form T-1
March 2010
Form must be Typed
Form must be Signed
All blanks must be Filled

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:

- ☐ Oil Lease: No. of Oil Wells _____ **
☒ Gas Lease: No. of Gas Wells 1 **
☐ Gas Gathering System: _____
☒ Saltwater Disposal Well - Permit No.: D18266
Spot Location: 1384 feet from ☐ N / ☒ S Line
3813 feet from ☒ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: Kismet Massoni

** Side Two Must Be Completed.

Effective Date of Transfer: 4/1/12

KS Dept of Revenue Lease No.: 206278

Lease Name: Gano "A"

NE SW Sec. 35 Twp. 32S R. 31 ☐ E ☒ W

Legal Description of Lease: SW/4 & N/2 SE/4 Section 35

County: Seward

Production Zone(s): Hodges

Injection Zone(s): Council Grove Ft Riley

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling OK

Past Operator's License No. 33709 Exp. 2/9/09

Past Operator's Name & Address: POGO Producing Company LLC

717 Texas Ave. Suite 2100 Houston, TX 7002

Title: Manager Regulatory and Compliance Affairs

Contact Person: Bob Tierney

Phone: 713-579-6578

Date: 3/21/2012

Signature: Bob Tierney

New Operator's License No. 33999

New Operator's Name & Address: Linn Operating, Inc.

14000 Quail Springs Parkway, Suite 500

Oklahoma City, OK 73134

Title: Regulatory Compliance Specialist III

Contact Person: L.R. "Bob" Reichardt

Phone: 405-241-2269

Oil / Gas Purchaser: _____

Date: 3/27/12

Signature: L.R. Reichardt

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APR 05 2012

KCC WICHITA

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

Linn Operating Inc is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: D-18.266 . Recommended action: Violation
Need UIC for 2006-2011
Date: 4-10-12 Cheryl L. Beyer
Authorized Signature

_____ is acknowledged as
the new operator of the above named lease containing the surface pit
permitted by No.: _____
Date: _____
Authorized Signature

DISTRICT _____ EPR 4-9-12 PRODUCTION 4-17-12 UIC 4-10-12
Mail to: Past Operator 4-10-12 New Operator 4-10-12 District (1) 4-10-12

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

040112_gano_A.2.pdf

* Lease Name: Gano "A"

* Location: NE SW Section 35, T32S, R31W

~~KCC WICHITA~~

* 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

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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)

OPERATOR: License # 33999
Name: Linn Operating, Inc
Address 1: 14000 Quail Springs Pky, Suite 5000
Address 2: _____
City: Oklahoma City State: OK Zip: 73134 + _____
Contact Person: L. R. Reichardt
Phone: (405) 241-2269 Fax: (405) 241-2397
Email Address: BReichardt@linenergy.com

Well Location:
_____ NE SW Sec. 35 Twp. 32 S. R. 31 ☐ East ☒ West
County: Seward
Lease Name: Gano "A" Well #: 4

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: Cynthia Ann Saunders
Address 1: P.O. Box 847
Address 2: _____
City: Gillette State: WY Zip: 82717 + _____

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 county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 4/3/12 Signature of Operator or Agent: L. R. Reichardt Title: Regulatory Compliance Spec.

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APR 05 2012