

**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:

- ☐ Oil Lease: No. of Oil Wells \_\_\_\_\_ \*\*
- ☒ Gas Lease: No. of Gas 1 \*\*
- ☐ Gas Gathering System: \_\_\_\_\_
- ☐ Saltwater Disposal Well - Permit No.: \_\_\_\_\_
- Spot Location: \_\_\_\_\_ feet from ☐ N / ☐ S Line
- \_\_\_\_\_ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: \_\_\_\_\_
- Entire Project: ☐ Yes ☐ No
- Number of injection wells \_\_\_\_\_
- Field Name HUGOTON
- \*\* Side Two Must Be Completed!**

Effective Date of Transfer: July 1, 2012KS Dept of Revenue Lease No.: 201348Lease Name: GAEDDERT- - - SE Sec 23 Twp 23S R 38W ☐ E ☐ WLegal Description of Lease: Sec. 23 23S 38W SE Qtr.County: KEARNYProduction Zone(s): CHASE

Injection Zone(s): \_\_\_\_\_

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. 6/30/13

Past Operator's Name & Address BP America Production Company

P.O. Box 3092, Houston, TX 77253

Phone 281-366-7816Date 6/25/2012

Signature

Lou BarryTitle Regulatory SupervisorContact Person: Lou Barry Room 3.142B WL-1

New Operator's License No. 33999

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

600 Travis, Suite 5100, Houston, Texas

77002

Contact Person: Nancy FitzwaterPhone 281-840-4266

Oil/Gas Purchaser

Date 6/25/2012

Signature

Nancy FitzwaterTitle Regulatory Compliance Advisor

**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.

\_\_\_\_\_ is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: \_\_\_\_\_. Recommended action \_\_\_\_\_

\_\_\_\_\_ is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.: \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Authorized Signature \_\_\_\_\_

DISTRICT \_\_\_\_\_

EPR 2-20-14PRODUCTION 2-24-14UIC 2-20-14

Mail to: Past Operator \_\_\_\_\_

New Operator \_\_\_\_\_

District \_\_\_\_\_

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

**KCC WICHITA****FEB 14 2014****RECEIVED**

## Side Two Must Be Filed For All Wells

KDOR Lease No.: 201346

\*Lease Name: GAEDDERT \*Location: 23 23 38 NW NW SE

[illegible]

**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

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

Form KSONA-1  
January 2014  
**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 # 5952  
Name: BP America Production Company  
Address 1: P.O. Box 3092  
Address 2: \_\_\_\_\_  
City: Houston State: Texas Zip: 77253 + \_\_\_\_\_  
Contact Person: DeAnn Smyers  
Phone: ( 281 ) 366-4395 Fax: ( 281 ) 366-7836  
Email Address: smyerscd@bp.com

Well Location:  
\_\_\_\_ NW \_\_\_\_ NW \_\_\_\_ SE Sec. 23 Twp. 23S S. R. 38W ☐ East ☒ West  
County: KEARNY  
Lease Name: GAEDDERT Well #: 1

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

**NE, SE Sec 23 23S 38W**

**Surface Owner Information:**

Name: Ellen M Kurz  
Address 1: c/o Toni Annette Clinton Trustee  
Address 2: 283 Creekwood Cove Ln Apt 1B  
City: Lenoir City State: TN Zip: 37772 + \_\_\_\_\_

*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 must provide the name and address of the surface owner by filling out the top section of this form and 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: February 6, 2014 Signature of Operator or Agent: Lois Barry Title: Regulatory Supervisor

**KCC WICHITA**  
**FEB 14 2014**  
**RECEIVED**