### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 July 2014 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**   | Effective Date of Transfer: August 29, 2014                                |  |  |  |  |
| Gas Lease: No. of Gas Wells 2 ***   | KS Dept of Revenue Lease No.:  |  |  |  |  |
| Gas Gathering System:   | Lease Name: Doll   |  |  |  |  |
| Saltwater Disposal Well - Permit No.:   |  |  |  |  |  |
| Spot Location: feet from N / S Line   |  |  |  |  |  |
| feet from E / W Line  | Legal Description of Lease: Section 3-23S-36W                              |  |  |  |  |
| Enhanced Recovery Project Permit No.:   |  |  |  |  |  |
| Entire Project: Yes No  | County: Kearny   |  |  |  |  |
| Number of Injection Wells **  | Production Zone(s): Chase, Chase   |  |  |  |  |
| Field Name: Kansas Hugoton  | Injection Zone(s):   |  |  |  |  |
| * Side Two Rust Be Googlejed.   | injection zone(s).   |  |  |  |  |
| Surface Pit Permit No.:   | feet from N / S Line of Section  |  |  |  |  |
| (API No. if Drill Pit, WO or Haul)  | feet from E / W Line of Section  |  |  |  |  |
| Type of Pit: Emergency Burn Settling  | Haul-Off Workover Drilling   |  |  |  |  |
| Past Operator's License No. 32606   | Contact Person: Randy Bolles, Manager Regulatory Compliance                |  |  |  |  |
| Doyon Engray Braduction Co. I B   | Phone: 405-228-8588  |  |  |  |  |
| Past Operator's Name & Address: Devon Energy Floduction Co., LP  333 West Sheridan Ave., Oklahoma City, Oklahoma 73102-5015 | Date: August 29, 2014  |  |  |  |  |
|   | Date:  |  |  |  |  |
| Title: John Raines, Vice President Land   | Signature:   |  |  |  |  |
|   |  |  |  |  |  |
| New Operator's License No. 33999 \  | Contact Person: Nancy Fitzwater  |  |  |  |  |
| New Operator's Name & Address: Linn Operating, Inc. Received  | Phone: 281-840-4000  |  |  |  |  |
| 600 Travis, Suite 5100 KANSAS CORPORATION COMMISSI  | Oil / Gas Purchaser: Oneok Midstream Gas Supply                            |  |  |  |  |
| Houston, Texas 77002 SEP 1 2 2014   | Date: August 29, 2014  |  |  |  |  |
| Title: Regulatory Compliance Supervisor CONSERVATION DIVISION WICHITA, KS   | Signature: Dance Litzwater   |  |  |  |  |
| Acknowledgment of Transfer: The above request for transfer of injection a   | authorization, surface pit permit # has been                               |  |  |  |  |
|   | Commission. This acknowledgment of transfer pertains to Kansas Corporation |  |  |  |  |
| Commission records only and does not convey any ownership interest in the a   |  |  |  |  |  |
|   |  |  |  |  |  |
| is acknowledged as  | is acknowledged as   |  |  |  |  |
| the new operator and may continue to inject fluids as authorized by   | the new operator of the above named lease containing the surface pi        |  |  |  |  |
| Permit No.: Recommended action:   | permitted by No.:  |  |  |  |  |
|   |  |  |  |  |  |
| Date:   | Date:  |  |  |  |  |
|   | PRODUCTION OCT 1 3 2014 UIC OCT 1 3 2014                                   |  |  |  |  |
| DISTRICT EPR /0-/0-/4 F Mail to: Past Operator New Operator   |  |  |  |  |  |

#### Side Two

#### Must Be Filed For All Wells

| KDOR Lease No.: 200984, 221809     |                |   |                            |                                   |                                      |  |  |
|------------------------------------|----------------|---|----------------------------|-----------------------------------|--------------------------------------|--|--|
| * Lease Name                       | Doll           | * Location: Section 3-23S-36W                               |                            |                                   |                                      |  |  |
| Well No. API No. (YR DRLD/PRE '67) |                | Footage from Section Line (i.e. FSL = Feet from South Line) |                            | Type of Well<br>(Oil/Gas/INJ/WSW) | Well Status<br>(PROD/TA'D/Abandoned) |  |  |
| 1                                  | 15-093-00113 / | Circle<br>2310 FSL FSL/FNL                                  | Circle<br>1780 FEL FEL/FWL | Gas                               | Producing 200984                     |  |  |
| 2                                  | 15-093-21468 / | 1250 FSL FSL/FNL  | 1250 FWL FEL/FWL           | Gas                               | Producing 22/809                     |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSUFNL  | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
| -14-                               |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   | _                                    |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   | Descived                             |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    | KANSAS CO                         | Received<br>DRPORATION COMMISSION    |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   | P 1 2 2014                           |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   | ERVATION DIVISION<br>WICHITA, KS     |  |  |
|                                    |                | FSL/FNL   | FEL/FWL                    |                                   |                                      |  |  |

A separate sheet may be attached if necessary

<sup>\*</sup> 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 2014
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 # 23606  Name: Devon Energy Production Co., LP  Address 1: 333 West Sheridan Avenue  Address 2:   | າງ ງາຄ  |             |  |  |  |
|---|---|-------------|--|--|--|
| Address 1: 333 West Sheridan Avenue  County: Kearny  Lease Name: Doll  If filing a Form T-1 for multip the lease below:  Contact Person: Randy Bolles  Phone: ( 405 ) 228-8588 Fax: ( )  Email Address: Randy.Bolles@dvn.com  Surface Owner Information: Name: William A. & Diane Simshauser (h/w)  Address 1: 1697 Road 240  Address 2: City: Lincoln State: KS Zip: 67860 +  If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intenthe KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and elease preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB  Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form CP-1 that I am filling in connection with this form: 2) if the form being filed is a Form C-1 or 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 to the surface owner(s). To mitigate the addit task, I acknowledge that I must provide the name and address of the surface owner by fillin that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with the formous interpretation of the surface with this form. If the fee   | JS Twp. 235 S.  | R. 36       | East X West                                |  |  |
| City: Oklahoma City   |   |             |  |  |  |
| City: Oklahoma City   |   | Well        | <sub>#</sub> : <u>1, 2</u>                 |  |  |
| Contact Person: Randy Bolles  | If filing a Form T-1 for multiple wells on a lease, enter the legal description |             |  |  |  |
| Phone: ( 405 ) 228-8588 Fax: ()  Email Address: Randy.Bolles@dvn.com  Surface Owner Information:  Name: William A. & Diane Simshauser (h/w)  Address 1: 1697 Road 240  Address 2:   |   |             |  |  |  |
| Surface Owner Information:  Name: William A. & Diane Simshauser (h/w)  Address 1: 1697 Road 240  Address 2: City: Lincoln  State: KS Zip: 67860 +  If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intented are preliminary non-binding estimates. The locations of lease roads, tank batteries, pipelines, and electare preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB  Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have owner(s) of the land upon which the subject well is or will be located: 1) a copy of the 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; and 3) my operator name, address, phone number, fax, and email address.  I have not provided this information to the surface owner(s). To mitigate the addit task, I acknowledge that I must provide the name and address of the surface owner by filling that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with the fehalous of the surface owner by filling that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with the fehalous of the surface owner by filling that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with the fehalous of the surface owner by filling the second option, submit payment of the \$30.00 handling fee with this form. If the fee   |   |             |  |  |  |
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| Address 2:  | nation to the left for t  | each surf   | face owner. Surface                        |  |  |
| If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and elect are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or F 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 h KCC will be required to send this information to the surface owner(s). To mitigate the addit task, I acknowledge that I must provide the name and address of the surface owner by filling that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with the surface owner that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with the surface owner that I am being charged a \$30.00 handling fee with this form. If the fee   | iuna in the records o<br>e property tax record                                  | of the c    | sier of deeds for the<br>county treasurer. |  |  |
| If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intenthe KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form CP-1 that I am filling in connection with this form; 2) if the form being filed is a Form C-1 or 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 kCC will be required to send this information to the surface owner(s). To mitigate the addit task, I acknowledge that I must provide the name and address of the surface owner by filling that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with the surface owner option, submit payment of the \$30.00 handling fee with this form. If the fee  |   |             |  |  |  |
| <ul> <li>✓ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or F form; and 3) my operator name, address, phone number, fax, and email address.</li> <li>☐ I have not provided this information to the surface owner(s). I acknowledge that, because I h KCC will be required to send this information to the surface owner(s). To mitigate the addit task, I acknowledge that I must provide the name and address of the surface owner by filling that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with the surface owner by the second option, submit payment of the \$30.00 handling fee with this form. If the fee</li> </ul>   | ctrical lines. The lo   | ocations    | shown on the pla                           |  |  |
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| If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee  | tional cost of the K<br>ng out the top sect                                     | CC per      | forming this                               |  |  |
| ionn and the associated Form C-1, Form CD-1, Form F-1, or Form CF-1 will be retained.   | is not received wi  | ith this fo | orm, the KSONA-                            |  |  |
| Hereby certify that the statements made herein are true and correct to the best of my knowledge at August 29, 2014  | and holiaf  | · Regula    | itory Compliance                           |  |  |

SEP 1 2 2014