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: MUST be submitte			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: September 24, 2014		
Gas Lease: No. of Gas Wells **	KS Dept of Revenue Lease No.: 200791		
Gas Gathering System:	Lease Name: Cox 1		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: See attached.		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Stevens		
Number of Injection Wells **	Production Zone(s): Chase Group		
Field Name: Hugoton Gas Area	Injection Zone(s): N/A		
** Side Two Must Be Completed.	IIIJeonori Zorie(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		
- And Sottling	Haul-Off Workover Drilling		
Type of Pit: Emergency Burn Settling	- I want		
Past Operator's License No. 33243 /	Contact Person:James E. Raley		
Past Operator's Name & Address:Dorchester Minerals Operating LP	Phone: 214-559-0300		
3838 Oak Lawn Ave., Ste. 300, Dallas, TX 75219-4541	Date: September 23, 2014		
Title: Chief Operating Officer	Signature: fame & Laley		
Title.	garner : parry		
New Operator's License No	Contact Person: Nancy Fitzwater		
New Operator's Name & Address: Linn Operating, Inc. Received	Phone: 281-840-4000		
600 Travis, Suite 5100 KANSAS CORPORATION COMMISSION	Oil / Gas Purchaser: Anadarko		
Houston, TX 77002 OCT 0 7 2014	Date: 10-1-30/4		
CONSERVATION DIVISION	Dans, Fitz Vitu		
Title: Regulatory Compliance Supervisor WICHITA, KS	Signature: MIM SULLY		
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been		
noted, approved and duly recorded in the records of the Kansas Corporation C	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the a	above injection well(s) or pit permit.		
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 pit		
Permit No.: Recommended action:	permitted by No.:		
	Date:		
Date:	Authorized Signature		
DISTRICT EPR / 2 - H - J 4	PRODUCTION DEC 0 5 2014 DEC 0 5 2014		
Mail to: Past Operator New Operator			

Stevens County, Kansas

Lease	Unit Legal Description	Acreage
Cox #1		
	NE/4 Sec. 35-T34S-R39W	160
	SE/4 Sec. 35-T34S-R39W	160
	SE/4 Sec. 26-T34S-R39W	160
	SW/4 Sec. 25-T34S-R39W	160
		640

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OCT 0 7 2014

CONSERVATION DIVISION WICHITA, KS

Side Two

Must Be Filed For All Wells

Lease Name:	CUA I	* Location: SE/4 Sec. 26 T34S R39W			
			* Location:		
Well No. API No. (YR DRLD/PRE '67)		Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	1518900679 /	140 <i>Gircle</i> FSI/FNL	1320 Circle FEL FWL	Gas	Prod
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	Received	FSL/FNL	FEL/FWL		
	KANSAS CORPORATION COMMISSION	FSL/FNL	FEL/FWL		
	OCT 0 7 2014	FSL/FNL	FEL/FWL		
Vermanda (7 to 2 to 1	CONSERVATION DIVISION WICHITA, KS	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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 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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (C	Cathodic Protection Borehole Intent) 🗵 T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License # 33243 Name: Dorchester Minerals Operating LP	Well Location:			
Address 1: 3838 Oak Lawn Avenue				
Address 2: Suite 300	County: Stevens Lease Name: Cox Well #: 1			
City: Dallas State: TX Zip: 75219 + 4541				
Contact Person: James E. Raley	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Contact Person: James E. Raley Phone: (214) 559-0300 Fax: (214) 559-0301				
Email Address: jraley@dmlp.net				
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Name: Charlene Trahern et al Address 1: P. O. Box 247 Address 2: City: Richfield State: KS Zip: 67953 +	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.			
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and a batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be loce CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form oeing filed is a Form C-1 or Form CB-1, the plat(s) required by this			
KCC will be required to send this information to the surface ow	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form.			
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.			
I hereby certify that the statements made herein are true and correct to September 23, 2014 Date: Signature of Operator or Agent:				