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 submit	tted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 01/01/15			
Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 208044			
Gas Gathering System:	Lease Name: CURTIS - A SE _ NE Sec. 5 Twp. 32 R. 38 EVW			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	<u>SE _ NE Sec. 5 NWP. 32 H. 36 E V W</u>			
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	NE Sec 5 Twp 32 Rge 38 W			
Entire Project: Yes No	County: STEVENS			
Number of Injection Wells**	Production Zone(s): COUNCIL GROVE GROUP			
Field Name: PANOMA GAS AREA				
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.: N/A	feet from N / S Line of Section			
(API No. if Drill Pit, WO or Haul)	feet from			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling			
Past Operator's License No. 4824 /	Contact Person:DALE BANKHEAD			
Past Operator's Name & Address: PIONEER NATURAL RES. USA INC.	Phone: _972-969-3886			
5205 N. O'CONNOR BLVD, SUITE 200 IRVING, TX 75039	Date: 12/08/2014 KCC WICH!			
	Man 1			
Title: CORPORATE ENGINEERING V.P.	Signature. DEC 3 to Zulf			
New Operator's License No	Contact Person: NANCY FITZWATER			
New Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4266			
600 TRAVIS, SUITE 5100	Oil / Gas Purchaser: PIONEER NATURAL RESOURCES			
HOUSTON, TEXAS 77002	Date: 12/08/2014			
Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR	Signature:			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #N/A has been			
	Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the				
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			
	permitted by No.:			
Permit No.: Recommended action:	permitted by No			
Date	Date:			
Date:	Authorized Signature			
DISTRICT EPR /-/5-/5	PRODUCTION JAN 1 6 2015 UKAN 1 6 2015			
Mail to: Doct Operator New Opera				

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 208044				
Lease Name:	CURTIS - A	* Location: NE Sec 5 Twp 32 Rge 38 W			
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)
2-5	15-189-10000-0000/	Circle 1980 FSL/RDL	660 Circle €D/FWL	GAS	PR
		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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		DEC 3 0 2014
		FSL/FNL	FEL/FWL		RECEIVED
		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.

	Well Location:		
PIONEER NATURAL RES. USA INC.	SE_NE_Sec. 5 Twp. 32 S. R. 38 East West		
OPERATOR: License # 4824 Name: PIONEER NATURAL RES. USA INC. Address 1: 5205 N O'CONNOR BLVD SUITE 200	County: STEVENS		
Address 1: SUITE 200	County: STEVENS Lease Name: CURTIS - A	Well #: 2-5	
Address 2:	# Sline o Form T 1 for multiple wells on		
City: State: Zip	If filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below:		
Contact Person: ————————————————————————————————————	-	MCC MICHA	
Phone: () rax. () dale.bankhead@pxd.com	KCC WICH!		
Email Address:	-	DEC 3 0 2014	
Surface Owner Information:		RECEIVED	
	_ When filing a Form T-1 involving multiple	e surface owners, attach an additional	
Name: KELLY R. CAVNER Address 1: PO BOX 369	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.		
Address 2			
City: CARNEY State: OK Zip: 74832-0369 +	_		
the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered	ank batteries, pipelines, and electrical lines d 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 owner(s) of the land upon which the subject well is or will b CP-1 that I am filing in connection with this form; 2) if the for form; and 3) my operator name, address, phone number, fax	e located: 1) a copy of the Form C-1, Form being filed is a Form C-1 or Form CB-1 and email address.	the following to the surface m CB-1, Form T-1, or Form , the plat(s) required by this	
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will b CP-1 that I am filing in connection with this form; 2) if the for	e located: 1) a copy of the Form C-1, Form being filed is a Form C-1 or Form CB-1, and email address. I acknowledge that, because I have not province owner(s). To mitigate the additional cost ess of the surface owner by filling out the	the following to the surface m CB-1, Form T-1, or Form , the plat(s) required by this rovided this information, the of the KCC performing this	
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