### 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	itted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 01/01/15
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 215855
Gas Gathering System:	Lease Name: DUNN
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	NE - NE - SW - SW Sec. 34 Twp. 30 R. 38 EVW
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	SW Sec 34 Twp 30 Rge 38 W
Entire Project: Yes No	County: GRANT
Number of Injection Wells **	Production Zone(s): CHASE GROUP
Field Name: HUGOTON GAS AREA	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:   N/A  (API No. if Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover Drilling KA
Past Operator's License No	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	40/00/0044
	Date: 12/08/2014 KCC WICH!
Title: CORPORATE ENGINEERING V.P.	Signature: DEC 3 0 2014
New Operator's License No. 33999 /	Contact Person: NANCY FITZWATER RECEIVED
New Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4266
600 TRAVIS, SUITE 5100	
HOUSTON, TEXAS 77002	Oil / Gas Purchaser: PIONEER NATURAL RESOURCES
	Date: 12/08/2014
Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR	Signature: Nancy Sitzurates.
Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the a	Commission. This acknowledgment of transfer pertains to Kansas Corporation
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	Authorized Signature
DISTRICT EPR /-14-15 P	RODUCTION JAN 1 5 2015 UN AN 1 5 2015
Mail to: Past Operator New Operator	District

#### Side Two

### Must Be Filed For All Wells

* Lease Name:	DUNN		* Location:	SW Sec 34 Twp 30 Rge	38 W
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr	Section Line	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
3-34	15-067-20862-0000	1250 Circle	Circle 4040 K⊕/FWL	GAS	PR
	-	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
				-	
					NCC WICH
					DEC 30 2014
					4 25 AF 1 A F 1
			551./511		
		FSL/FNL			
		<b></b>		-	
		F5L/FNL			

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 # 4824	_ Well Location:		
Name: PIONEER NATURAL RES. USA INC.	NE_NE_SW_SW_Sec. 34 Twp. 30 S. R. 38 East X West		
Name: PIONEER NATURAL RES. USA INC.  Address 1: 5205 N O'CONNOR BLVD	County: GRANT		
Address 2. SOITE 200	Lana Nama DUNN 3-34		
City: IRVING State: TX Zip: 75039	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: DALE BANKHEAD	the lease below:		
City: IRVING State: TX Zip: 75039 + Contact Person: DALE BANKHEAD  Phone: ( 972 ) 969-3886 Fax: ( 972 ) 969-3587	_		
Email Address: dale.bankhead@pxd.com	KCC WICHIT		
	DEC 3 0 2014		
Surface Owner Information:			
Name: DON DUNN Address 1: 6426 W RD 25	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: O420 W HD 25	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		
Address 2:	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 (Cath the KCC with a plat showing the predicted locations of lease roads, ta	hodic Protection Borehole Intent), you must supply the surface owners and		
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If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered 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 be	Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, the plates and the surface elocated: 1) a copy of the Form C-1, the plates a Form C-1 or Form CB-1, the plates are plated by this		
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