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**	NW - NW - SE - NW Sec. 14 Twp. 30 R. 37 E W			
Gas Lease: No. of Gas Wells**				
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	NW Sec 14 Twp 30 Rge 37 W			
Entire Project: Yes No	County: GRANT			
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 E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling K.			
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			
Title: CORPORATE ENGINEERING V.P.	Signature: Assa KCC WICH!TA			
Title.	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	Oil / Gas Purchaser: PIONEER NATURAL RESOURCES			
HOUSTON, TEXAS 77002	Date: 12/08/2014			
DECLINATORY COMPLIANCE ADVISOR/SUPERVISOR	Nancy Sitzmater			
Title:	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			
Permit No.: Recommended action:	permitted by No.:			
Data	Date:			
Date:	Authorized Signature 2015			
DISTRICT EPR	PRODUCTION JAN 1.5 2015			
Mail to: Past Operator New Operator	or District			

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 208050						
Lease Name:	DUNNE		* Location:	IW Sec 14 Twp 30 Rge	37 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)	
2-14	15-067-20022-0000	Circle FSL/ROSL	1400 Circle FEL/RWD	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 WICHIT	
		FSL/FNL	FEL/FWL		DEC 3 0 2014	
		FSL/FNL	FEL/FWL		RECEIVED	
		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			

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	(Cathodic Protection Borehole Intent) X T-1 (Trans	fer) CP-1 (Plugging Application)	
4824	Wall Location:		
OPERATOR: License # 4824 Name: PIONEER NATURAL RES. USA INC. Address 1: 5205 N O'CONNOR BLVD Address 2: SUITE 200	Well Location: NW_NW_SE_NW_Sec. 14 Twp. 30 S. R. 37 ☐ East ➤ West		
Address 1, 5205 N O'CONNOR BLVD	County: GRANT		
Address 2: SUITE 200	Lease Name: DUNNE	Well #: 2-14	
IRVING TX - 75039	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
City: Triving State: 17 Zip: 70000 + Contact Person: DALE BANKHEAD Phone: (972) 969-3886 Fax: (972) 969-3587 Email Address: dale.bankhead@pxd.com		KCC WICHIT	
Email Address: date.bankiread@pxd.com	DEC 3 0 2014		
Surface Owner Information:		RECEIVED	
Name: CACTUS OF KANSAS INC.	When filing a Form T-1 involving multiple	surface owners, attach an additional	
Name: CACTUS OF KANSAS INC. Address 1: PO BOX 3050	sheet listing all of the information to the li owner information can be found in the red	left for each surface owner. Surface cords of the register of deeds for the	
Address 2:	county, and in the real estate property tax	records of the county treasurer.	
City: <u>AMARILLO</u> State: <u>TX</u> Zip: <u>79116-3050</u> +			
 are preliminary non-binding estimates. The locations may be entered of 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 th	e following to the surface	
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,	being filed is a Form C-1 or Form CB-1, t	the plat(s) required by this	
I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the	owner(s). To mitigate the additional cost or is of the surface owner by filling out the to	f the KCC performing this	
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 CF	g fee with this form. If the fee is not receing 19-1 will be returned.	ved with this form, the KSONA-1	
I hereby certify that the statements made herein are true and correct to	to the best of my knowledge and belief.		
12/08/2014 Date: Signature of Operator or Agent:	Cor	porate Engineering V.P.	