KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 1-1 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,
MIST be submitted with this form.

Check Applicable Boxes:	nea 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.: 201091 Lease Name: EICHENBERGER NE - NE - NE - SW Sec. 27 Twp. 29 R. 37 E W		
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.:	SW Sec 27 Twp 29 Rge 37 W County: GRANT		
Entire Project: Yes No			
Number of Injection Wells **	Production Zone(s): CHASE GROUP		
Field Name: HUGOTON GAS AREA	Injection Zone(s):		
** Side Two Must Be Completed.	,		
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		
Type of Fit. Enlergency Burn Setting			
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	Date: 12/08/2014 KCC WICHITA		
Title: CORPORATE ENGINEERING V.P.	Signature:		
33999 /	Contact Person: NANCY FITZWATER RECEIVED		
New Operator's License No.			
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			
	1		
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 5 2015		
	PRODUCTION JAN 1 5 2015 UIC JAN 1 5 2015		
Mail to: Past Operator New Operator	or District		

Side Two

Must Be Filed For All Wells

	No.: 201091 EICHENBERGER		* Location:	SW Sec 27 Twp 29 Rge	937 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
1-27	15-067-00434-0000	Circle 2440 RSD/FNL	Circle 2840 FD/FWL	GAS	PR
		FSL/FNL	FEL/FWL		
			FEL/FWL		
···		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
					MOO MIOI ME
					DEC 20 204
					RECEIVED
			FEL/FWL		
			FEL/FWL		
			FEL/FWL		
		FSL/FNL			
		FSL/FNL			
		FSL/FNL			
		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 (Ca	athodic Protection Borehole Intent) 🗵 T-1 (Transfer) 🗆 CP-1 (Plugging Application)	
OPERATOR: License # 4824	Well Location:	
Name: PIONEER NATURAL RES. USA INC.	NE_NE_NE_SW Sec. 27 Twp. 29 S. R. 37 ☐ East 🗷 West	
Address 1: 5205 N O'CONNOR BLVD		
Address 2: SUITE 200	County: GRANT Lease Name: EICHENBERGER Well #: 1-27	
City: IRVING State: TX Zip: 75039 + Contact Person: DALE BANKHEAD Phone: (972) 969-3886 Fax: (972) 969-3587 Email Address: dale.bankhead@pxd.com	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:	
Contact Person: DALE BANKHEAD		
Phone: (972) 909-3880 Fax: (972) 903-3387		
Email Address: dale.banknead@pxd.com	KCC WICHITA	
	DEC 3 0 2014	
Surface Owner Information: Name: GRACE EICHENBERGER TRUST	When filing a Form T-1 involving multiple surface owners, attach an additional 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.	
Name: GRACE EICHENBERGER TRUST Address 1: 3300 W 87TH ST		
Address 2:		
City: LEAWOOD State: KS Zip: 66206 +		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on	batteries, pipelines, and electrical lines. The locations shown on the plat	
Select one of the following:		
I certify that, pursuant to the Kansas Surface Owner Notice Acowner(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 b form; and 3) my operator name, address, phone number, fax, an	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing 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 own	knowledge that, because I have not provided this information, the ner(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 CC, 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-1	ee 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	the best of my knowledge and belief.	
12/08/2014	Corporate Engineering V.P.	
Date: Signature of Operator or Agent: KUNA	Title:	