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 submi | 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.: 208101 | | | |
| Gas Gathering System: | Lease Name: MCCREIGHT S2 NW_Sec. 3Twp. 31R. 39 E V W | | | |
| 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 3 Twp 31 Rge 39 W County: STEVENS Production Zone(s): COUNCIL GROVE GROUP Injection Zone(s): | | | |
| Entire Project: Yes No | | | | |
| Number of Injection Wells** | | | | |
| 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 | | | |
| 7,7 | | | | |
| 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: | | | |
| Title: CORPORATE ENGINEERING V.P. | Signature: Recompleted Signature: | | | |
| Tide. | DEC 3 0 2014 | | | |
| New Operator's License No | 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 | | | |
| REGULATORY COMPLIANCE ADVISOR/SUPERVISOR | Nancy Sitzmates | | | |
| Title: | Signature: | | | |
| Acknowledgment of Transfer: The above request for transfer of injection | n authorization, surface pit permit # N/A has been | | | |
| | n Commission. This acknowledgment of transfer pertains to Kansas Corporation | | | |
| Commission records only and does not convey any ownership interest in the | | | | |
| in colonous dand on | 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: | | | |
| Date: Authorized Signature | Authorized Signature | | | |
| DISTRICT EPR | PRODUCTION JAN 1 6 2015 WAN 16 2015 | | | |
| Mail to: Past Operator New Opera | | | | |

Side Two

Must Be Filed For All Wells

| | No.: 208101 MCCREIGHT | | * Location:N | IW Sec 3 Twp 31 Rge 39 | 9 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) |
| 2-3 | 15-189-20076-0000 | Circle 1900 FSL/FOSL | Circle 1400 FEL/F | GAS | PR |
| | | FSL/FNL | FEL/FWL | | |
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| | | | FEL/FWL | | |
| | - | | FEL/FWL | | |
| | | | FEL/FWL | | |
| | | | 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.

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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) X T-1 (Transfer) CP-1 (Plugging Application) | | |
|---|---|--|--|
| OPERATOR: License # 4824 | Well Location: | | |
| OPERATOR: License # 4824 Name: PIONEER NATURAL RES. USA INC. | S2 -NW Sec. 3 Twp. 31 S. R. 39 East X West | | |
| Address 1: 5205 N O'CONNOR BLVD | | | |
| Address 2: SUITE 200 | County: STEVENS Lease Name: MCCREIGHT Well #: 2-3 | | |
| City: IRVING State: TX 7in: 75039 + | If filing a Form T-1 for multiple wells on a lease, enter the legal description o | | |
| Contact Person: DALE BANKHEAD | the lease below: | | |
| Contact Person: DALE BANKHEAD Phone: (972) 969-3886 Fax: (972) 969-3587 | KCC WICHITA | | |
| Email Address: dale.bankhead@pxd.com | DEC 3 0 2014 | | |
| Surface Owner Information: | RECEIVED | | |
| Name: VINCENT YOUNGREN | 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 | | |
| Name: VINCENT YOUNGREN Address 1: PO BOX 488 | | | |
| Address 2: | 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. | | |
| City: HUGOTON State: KS Zip: 67951 + | | | |
| are preliminary non-binding estimates. The locations may be entered or | s 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. | | |
| CP-1 that I am filing in connection with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I address. | ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this | | |
| task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the K | of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form. fee with this form. If the fee is not received with this form, the KSONA-1 | | |
| I hereby certify that the statements made herein are true and correct to | 2 | | |
| 12/08/2014 Date: Signature of Operator or Agent: | Corporate Engineering V.P. Title: | | |