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 subm	nitted with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 01/01/15 KS Dept of Revenue Lease No.: 208655 Lease Name: MILLER EDITH L NW - SE - SE - SW Sec. 24 Twp. 33 R. 39 EV 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.:	SW Sec 24 Twp 33 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.	Injudion Zono(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		
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: KCC WICH:		
	DEC 3 0 2014		
New Operator's License No.	Contact Parson, 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		
	Names Sitamortos		
Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR	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			
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	Deter		
Date:	Date:Authorized Signature		
DISTRICT EPR /-/5-/5	PRODUCTION		
Mail to: Past Operator New Opera			

Side Two

Must Be Filed For All Wells

* Lease Name:	MILLER EDITH L		* Location:S	SW Sec 24 Twp 33 Rge	39 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)
2-24	15-189-20268-0000/	400 Circle	2190 Circle FEL/F	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 MICE.
			FEL/FWL		DEC 30 2014
		FSL/FNL	FEL/FWL		RECEIVED
			FEL/FWL		
		501 /5· ··			
			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 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 4824 Name: PIONEER NATURAL RES. USA INC. Address 1: 5205 N O'CONNOR BLVD	Well Location: NW _SE _SE _SW _Sec24 _Twp33 _SR39 East 🗷 West		
Name: PIONEER NATURAL RES. USA INC.			
Address 1: 5205 N O'CONNOR BLVD	County: STEVENS		
Address 2: SUITE 200	Lease Name: MILLER EDITH L Well #: 2-24 If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Address 2: SUITE 200 City: IRVING State: TX Zip: 75039 + Contact Person: DALE BANKHEAD			
Contact Person: DALE BANKHEAD Phone: (972) 969-3886 Fax: (972) 969-3587 Email Address: dale.bankhead@pxd.com			
Email Address: data.samilicad s pxd.ssm	DEC 3 0 2014		
Surface Owner Information: Name: JAMES E. LIGHT FARMS INC.	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		
Name: JAMES E. LIGHT FARMS INC. Address 1: P.O. BOX 146			
Address 2:	county, and in the real estate property tax records of the county treasurer.		
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
	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		
KCC will be required to send this information to the surface ov	cknowledge that, because I have not provided this information, the vner(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 KCC, 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-	fee 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 Date: Signature of Operator or Agent:	Corporate Engineering V.P. Title:		