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:	Inteu with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 1/1/2015 KS Dept of Revenue Lease No.: 221459 Lease Name: PARSONS			
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 11 Twp 31 Rge 37 W County: STEVENS			
Entire Project: Yes No				
Number of Injection Wells **	Production Zone(s):COUNCIL GROVE GROUP Injection Zone(s):			
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			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
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 KCC WICHIT			
Title: CORPORATE ENGINEERING V.P.	(Mrs.)			
Title:	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			
New Operator's Name & Address: 600 TRAVIS, SUITE 5100	Oil / Gas Purchaser: PIONEER NATURAL RESOURCES			
HOUSTON, TEXAS 77002	Date: 12/08/2014			
Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR	Signature: Nancy Sitzurates			
Acknowledgment of Transfer: The above request for transfer of injection	on authorization, surface pit permit # N/A has been			
	on Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the				
Commission records only and does not convey any own close motor and				
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			
DISTRICT EPR	PRODUCTION JAN 1 6 2015			
Mail to: Past Operator New Oper				

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 221459 /				
* Lease Name:	PARSONS		* Location:S	SW Sec 11 Twp 31 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)
2-11R	15-189-22107-0000	1250 Circle	4030 Circle	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		
			FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		KCC WICHITA
		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			
		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	Well Location:		
Name: PIONEER NATURAL RES. USA INC.	NESWSWSec11Twp31SR37 East 🔀 West		
Name: PIONEER NATURAL RES. USA INC. Address 1: 5205 N O'CONNOR BLVD			
Address 2: SUITE 200	County: STEVENS Lease Name: PARSONS Well #: 2-11R		
City: IRVING State: TX Zip: 75039 + Contact Person: DALE BANKHEAD Phone: (972) 969-3886 Fax: (972) 969-3587	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
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: ROME FARMS	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: 1096 ROAD BB	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.		
City: HUGOTON State: KS Zip: 67951 +			
the KCC with a plat showing the predicted locations of lease roads, tan	odic Protection Borehole Intent), you must supply the surface owners and be batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
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 located: 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 and email address.		
KCC will be required to send this information to the surface or	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this s 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	g fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.		
I hereby certify that the statements made herein are true and correct to	o the best of my knowledge and belief.		
12/08/2014 Date: Signature of Operator or Agent: Ann	Corporate Engineering V.P.		
Date: Signature of Operator or Agent:	Title:		