## 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 Kansa's 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				
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 226298				
Gas Gathering System:	Lease Name: TRUESDALE				
Saltwater Disposal Well - Permit No.:					
Spot Location: feet from N / S Line	NE NE Sec12 _ Twp30 _ R35 E \subseteq W				
feet from E / W Line	Legal Description of Lease:				
Enhanced Recovery Project Permit No.:	NE Sec 12 Twp 30 Rge 35 W				
Entire Project: Yes No	County: GRANT				
Number of Injection Wells **	Production Zone(s): CHASE				
Field Name: HUGOTON GAS AREA					
** Side Two Must Be Completed.	Injection Zone(s):				
Surface Pit Permit No.:  N/A  (API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section				
pir rive. ii Siii riq vi o di riadiy	feet from E / W Line of Section				
Type of Pit: Emergency Burn Settling	☐ Haul-Off ☐ Workover ☐ Drilling 火 ન				
Past Operator's License No. 4824 /	Contact Person:DALE BANKHEAD				
Past Operator's Name & Address: PIONEER NATURAL RES. USA INC.	Phone: 972-969-3886 KCC WICHITA				
5205 N. O'CONNOR BLVD, SUITE 200 IRVING, TX 75039	Date: 12/08/2014 7 DEC 3 0 2014				
Title: CORPORATE ENGINEERING V.P.	Signatura				
	RECEIVED				
New Operator's License No.	Contact Person: 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				
Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR	Signature: Nancy Sitzwater				
Askers de dissert of Transfers The phase are sent for transfer of injuries	n authorization surface nit normit # N/A has been				
Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit # nas been				
	on Commission. This acknowledgment of transfer pertains to Kansas Corporation				
Commission records only and does not convey any ownership interest in the	e above rijection well(s) or pit permit.				
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				
DISTRICT EPR	PRODUCTION JAN 1 5 2015 UIG AN 1 5 2015				
Mail to: Past Operator New Oper	ator District Unit -				

#### Side Two

#### Must Be Filed For All Wells

* Lease Name:	TRUESDALE			. *	Location:N	E Sec 12 Twp 30 Rge 35	W
Well No.	ell No. API No. Foota		Footage from Section Line r. FSL = Feet from South Line)			Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
1-12R	15-067-21613-0000/	330	Circle _FSL/R <b>SS</b> L	330	Circle RED/FWL	GAS	PR
			_FSL/FNL		FEL/FWL		
			_FSL/FNL		FEL/FWL		
	·		FSL/FNL		FEL/FWL		
<del></del>			_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		
					FEL/FWL		
			FSL/FNL		FEL/FWL	KCC MI	
						MEC 3 n	
						DEC 5 0	
						RECE	:IVED
	_		_FSL/FNL				
			_FSL/FNL		FEL/FWL		
					FEL/FWL		
			. FSL/FNL		FEL/FWL		
			FSL/FNL		_FEL/FWL		<u></u>
			FSL/FNL		_ FEL/FWL		

A separate sheet may be attached if necessary

<sup>\*</sup> 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 (C	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License # 4824	Mall and			
Name: PIONEER NATURAL RES. USA INC.	Well Location:			
Address 1: 5205 N O'CONNOR BLVD	NENESec. 12 _Twp. 30 _S. R. 35 East X West County:			
Address 2: SUITE 200	Lease Name: TRUESDALE Well #: 1-12R			
City: IRVING State: TX 7io: 75039	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Contact Person. DALE BANKHEAD FOR QUESTIONS, CALL VIRGINIA TIJERINA 972-969-5837				
Address 2: SUITE 200  City: IRVING State: TX Zip: 75039 +  Contact Person: DALE BANKHEAD FOR QUESTIONS, CALL VIRGINIA TIJERINA 972-969-5837  Phone: (972) 969-3889 Fax: (972) 969-3587				
Email Address: dale.bankhead@pxd.com				
KCC WICEIT	h			
Surface Owner Information: Name: BREWER FARM & RANCH LLP FEB 0.2 2015	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.			
Address 1: 1017 CLEAR CREEK DRIVE RECEIVED				
Address 2:				
City: MESQUITE State: TX Zip: 75181 +	esting, and in the real estate property tax records of the county treasurer.			
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 Select one of the following:	Datteries ninelines and electrical lines. The locations chown on the state			
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 be form; and 3) my operator name, address, phone number, fax, and     □ I have not provided this information to the surface owner(s). Lack	cated: 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 d email address.  Chowledge that, because I have not provided this information, the ler(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			
If choosing the second option, submit payment of the \$30.00 handling fe form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	e with this form. If the fee is not received with this form, the KSONA-1 will be returned.			
hereby certify that the statements made herein are true and correct to the	ne best of my knowledge and belief			
	A			
12/08/2014 Date: Signature of Operator or Agent:	Corporate Engineering V.P.			