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:	tted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:			
Gas Lease: No. of Gas Wells**				
Gas Gathering System:	Lease Name: WINGER CLARENCE			
Saltwater Disposal Well - Permit No.:	SE _ SE _ SE _ NW Sec. 21 Twp. 27 R. 40 EV W			
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	NW Sec 21 Twp 27 Rge 40 W County: STANTON			
Entire Project: Yes No				
Number of Injection Wells **	Production Zone(s): COUNCIL GROVE			
Field Name: PANOMA GAS AREA	Injection Zone(s):			
** 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 KCC WICHIT			
5205 N. O'CONNOR BLVD, SUITE 200 IRVING, TX 75039	Date: 12/08/2014 DEC 3 0 2014			
Title: CORPORATE ENGINEERING V.P.	Signature: Al Killer			
	RECEIVED			
New Operator's License No. 33999	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	Nancu Sitamaton			
Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR	Signature:			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #N/Ahas been			
noted, approved and duly recorded in the records of the Kansas Corporation	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.:			
. Neconimended action.	portinited by No.			
Date:	Date:			
Authorized Signature	Authorized Signature			
DISTRICT EPR _/-/3-/5	PRODUCTION JAN 1 4 2015 JAN 1 4 2015			
Mail to: Past Operator New Operat				

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 207588				
* Lease Name:	WINGER CLARENCE		* Location:	IW Sec 21 Twp 27 Rge 40	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)
8-21	15-187-20236-0000/	2340 Circle FSL/ROSL	2540 Circle FEL/FW	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		
7		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		
			FEL/FWL	KCC WIC	HITA
		FSL/FNL	FEL/FWL	DEC 3 0 20)14
		FSL/FNL	FEL/FWL	RECEIV	ED
		FSL/FNL	FEL/FWL		
		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 trie corresponding form being filed:	•1 (Cathodic Protection Borehole Intent) 🗵 T-1 (Transfer) 🗆 CP-1 (Plugging Application)		
OPERATOR: License # 4824	_ Well Location:		
DIONEED NATURAL DECLICA INC	SE_SE_SE_NW Sec. 21 Twp. 27 S. R. 40 East west		
Address 1: 5205 N O'CONNOR BLVD Address 3: SUITE 200			
AUULESS Z.	Lease Name: WINGER CLARENCE Well #: 8-21		
City: IRVING State: TX Zip: 75039 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
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: DUANE & KATHY KOSTER	When filing a Form T-1 involving multiple surface owners, attach an additional		
Name: DUANE & KATHY KOSTER Address 1: PO BOX 897	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:	_		
are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice	ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form		
	m 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	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ess of the surface owner by filling out the top section of this form and the 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 C	ing fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.		
I hereby certify that the statements made herein are true and correct			
	t to the best of my knowledge and belief.		
12/08/2014 Date: Signature of Operator or Agent:	t to the best of my knowledge and belief. Corporate Engineering V.P. Title:		