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,
MIST be submitted with this form.

Check Applicable Boxes:	ted 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.:223063 Lease Name: FROMONG MAUDE M		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	SE - SE - NW - NW Sec. 12 Twp. 30 R. 34 E W		
feet from E / W Line	Legal Description of Lease: NW Sec 12 Twp 30 Rge 34		
Enhanced Recovery Project Permit No.:	NW Sec 12 Twp 30 Rge 34		
Entire Project: Yes No	County: HASKELL		
Number of Injection Wells **	Production Zone(s):COUNCIL GROVE		
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	12/08/2014		
Title: CORPORATE ENGINEERING V.P.	MANSAS CORPORATION COMMISSIO		
Title:	Signature:		
22000	NANCY FITZIMATED CONCE		
New Operator's License No. 33999	Contact Person: NANCY FITZWATER CONSERVATION DIVISION WICHITA, KS		
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:		
Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the a	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
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 F	PRODUCTION JAN 2 1 2015 UIC JAN 2 1 2015		
Mail to: Past Operator New Operato	ì		

Side Two

Must Be Filed For All Wells

	No.: 223063 FROMONG MAUDE M		NI	W Sec 12 Twp 30 Rge	34
Lease Name:	THOMOTO MADDE W		* Location:	11 CCG 12 TWP 50 TYP	<u> </u>
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/Abandon
3-12	15-081-21338-0000/	1250 Circle	1250 Circle	GAS	PR
		FSL/FNL	FEL/FWL	A	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		
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		FSL/FNL _	FEL/FWL _		ORPORATION COMMISSION
		FSL/FNL	FEL/FWL		EC 3 1 2014
		FSL/FNL	FEL/FWL	CONSE	ERVATION DIVISION WICHITA, KS
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL -		
		FSL/FNL	FEL/FWL		
		FSI/FNI	FFI /FWI		

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.

Name: PIONEER NATURAL RES. USA INC. Address 1: 5205 N O'CONNOR BLVD Address 2: SUITE 200 Contact Person: DALE BANKHEAD Contact Person: DALE BANKHEAD Phone: (972) 969-3886	1921	
Address 1: 5205 N O'CONNOR BLVD Address 2: SUITE 200 City: IRVING State: TX Zip: 75039 - The state of the lease below: KNASA CORPORATION DIVISION BLE BANKHEAD DEC 3 1 2014 CONSERVATION DIVISION Surface Owner Information: Surface Owner Information: Name: GLENN S. FOX Address 1: 2901 W. 67TH ST. Address 2: City: MISSION HILLS State: KS Zip: 66208 + If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Select one of the following: X certify that, pursuant to the Kansas Surface Owner (S) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filling in connection with this form; 2) if the form being filled is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3 my operator name, address, phone number, rax, and email address. I have not provided this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by limit to the surface owner(s). To mitigate the additional cost of the KCC performing this form and that I am being charged a \$30.00 handling fee, payable to the KCC with its form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned. It choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form	OPERATOR: License # 4824	_ Well Location:
Contact Person: DALE BANKHEAD Phone: (972) 969-3886 Fax: (972) 969-3587 Email Address: dale bankhead@pxd.com DEC 3 1 2014 CONSERVATION DIVISION When filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: Received RANKAS CORPORATION COMMISS Ball bankhead@pxd.com DEC 3 1 2014 CONSERVATION DIVISION 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. City: MISSION HILLS State: KS zip: 66208 If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Select one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that 1 am filling in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address. If they are provided this information to the surface owner(s). To mitigate the additional cast of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form. If the returned. If choosing the second opt	Name: PIUNEER NATURAL RES. USA INU.	
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Contact Person. DALE BANKHEAD Phone: (972) 969-3886 Fax: (972) 969-3587 Email Address: dale.bankhead@pxd.com DEC 3 1 2014 Conservation Division Name: GLENN S. FOX Address 1: 2901 W. 67TH ST. Address 2: City: MISSION HILLS State: KS Zip: 66208 If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Select one of the following: X Certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that 1 am filling in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address. I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be required to be corrected to the best of my knowledge and belief. 12/08/2014	City: IRVING State: TX Zip: 75039	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
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Email Address. Gale. Dankhead@pxd.com Conservation Division WiChiTA, KS	Phone: (972) 969-3886 Fax: (972) 969-358/	— CORPORATION COMMISSIO
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	hereby certify that the statements made herein are true and correct	to the best of my knowledge and belief.