010115_Huxman_CL_15_11.pdf

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:	tted 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.: 216608 Lease Name: HUXMAN C L		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	NW - NW - SE _ SE Sec. 11 Twp. 30 R. 34 E W		
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	SE Sec 11 Twp 30 Rge 34 W County: HASKELL Production Zone(s): CHASE GROUP		
Entire Project: Yes No			
Number of Injection Wells **			
Field Name: HUGOTON 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)			
Total Dia Continu	feet from LE / W Line of Section Haul-Off Workover Drilling どん		
Type of Pit: Emergency Burn Settling			
Past Operator's License No	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			
Title: CORPORATE ENGINEERING V.P.			
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 Nancu Fitzwater		
Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # N/A has 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	above injection 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		
12016	PRODUCTION JAN 2 3 2012 UID AN 2 3 7015		
Mail to: Past Operator New Operat	~ .		
	ı		

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 216608				
* Lease Name:	HUXMAN C L		* Location:	SE Sec 11 Twp 30 Rge	34 W
Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet from		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
15-11	15-081-20581-0000	Circle 1259 RSL/FNL	1243 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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		F\$L/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		
		501 /51 H			
		TODTINE	LL/ VVL		

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)		
ODERATOR 1: # 4824	Well Lord's a		
OPERATOR: License # 4824 Name: PIONEER NATURAL RES. USA INC. Address 1: 5205 N O'CONNOR BLVD	Well Location: NW_NW_SE_SE_Sec. 11 Twp. 30 S. R. 34 ☐ East 🗷 West		
Address 1, 5205 N O'CONNOR BLVD	County: HASKELL		
Address 2: SUITE 200	Lease Name: HUXMAN C L Well #: 15-11		
City: IRVING State: TX 7ip: 75039	If Eliza a Form T.1 for multiple wells are already of the local description of		
Contact Person. DALE BANKHEAD	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		
City: IRVING State: TX Zip: 75039 + Contact Person: DALE BANKHEAD Phone: (972) 969-3886 Fax: (972) 969-3587 Email Address: dale.bankhead@pxd.com	DEC 3 0 2014		
	RECEIVED		
Surface Owner Information: WEEKS FARMS LTD			
Name: WEEKS FARMS LTD Address 1: 2090 RD PP	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		
Address 2:	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: SUBLETTE State: KS Zip: 67877 +			
the KCC with a plat showing the predicted locations of lease roads, ta	nodic Protection Borehole Intent), you must supply the surface owners and nk 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.		
Select one of the following:			
owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and		
	ng fee with this form. If the fee is not received with this form, the KSONA-1		
I hereby certify that the statements made herein are true and correct	to the best of my knowledge and belief.		
12/08/2014	Corporate Engineering V.P.		
Date: Signature of Operator or Agent: KUN	Title:		