## 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: MUST be submit	ted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 01/01/15  KS Dept of Revenue Lease No.: 202201  Lease Name: KENOYER			
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.:	SE Sec 5 Twp 31 Rge 37 W			
Entire Project: Yes No	County: STEVENS  Production Zone(s): CHASE GROUP			
Number of Injection Wells**				
Field Name: HUGOTON GAS AREA	Injection Zone(s):			
** Side Two Must Be Completed.	mjodion zono(o).			
Surface Pit Permit No.: N/A	feet from N / S Line of Section			
(API No. if Drill Pit, WO or Haul)				
Type of Pit: Emergency Burn Settling	Haul-Off			
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.				
	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	Signature: Nancy Sitzwater			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # N/A has been			
	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.:			
	Potes			
Date:	Date:			
/ 22 /	PRODUCTION JAN 2 3 2015 UNA N 2 3 2015			
Mail to: Past Operator New Operator				

#### Side Two

### Must Be Filed For All Wells

		<del></del>		_	
Lease Name	KENOYER		* Location:S	E Sec 5 Twp 31 Rge 3	7 W
Well No.	API No. (YR DRLD/PRE '67) (i.e.	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1-5	15-189-10084-0000 <sup>/</sup> 186	Circle RSI/FNL	1330 Circle	GAS	PR
		FSL/FNL	FEL/FWL		_
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		_
		FSL/FNL	FEL/FWL		
					CC WICHITA EC 3 0 2014
			FEL/FWL		RECEIVED
			FEL/FWL		
			FEL/FWL		
			FEL/FWL		
			FEL/FWL		
			FEL/FWL		
			FEL/FWL		
		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.

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# 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 (Ca	athodic Protection Borehole Intent) 🗵 T-1 (Transfer) 🗌 CP-1 (Plugging Application)		
OPERATOR: License # 4824	Well Location:		
Name: PIONEER NATURAL RES. USA INC.	S2 _SE _Sec. 5 _Twp. 31 _S. R. 37 _ East x West		
Name: PIONEER NATURAL RES. USA INC.  Address 1: 5205 N O'CONNOR BLVD	County: STEVENS		
Address 2: SUITE 200	County: STEVENS  Lease Name: KENOYER Well #: 1-5		
City: IRVING State: TX Zip: 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  Phone: ( 972 ) 969-3886 Fax: ( 972 ) 969-3587	KCC WICHITA		
Email Address: dale.bankhead@pxd.com	DEC 3 0 2014		
Surface Owner Information:	RECEIVED		
	When filing a Form T-1 involving multiple surface owners, attach an additional		
Name: ROME FARMS 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.		
Address 2:			
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:	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loc	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing 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 own	knowledge that, because I have not provided this information, the ner(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 CC, 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-1			
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.		
12/08/2014  Date: Signature of Operator or Agent:	Corporate Engineering V.P.  Title:		