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:	ttea 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.: 202278		
Gas Gathering System:	Lease Name: KLEIN R G		
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.:	NE Sec 23 Twp 30 Rge 35 W		
Entire Project: Yes No	County: GRANT		
Number of Injection Wells **	Production Zone(s): CHASE GROUP		
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)			
To the contract of the contrac	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling (ਮ		
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	Date: 12/08/2014		
Title: CORPORATE ENGINEERING V.P.	Signature: KCC WICHITA		
	DEC 3 0 2014		
New Operator's License No. 33999/	Contact Person: NANCY FITZWATER		
New Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4266 RECEIVED		
600 TRAVIS, SUITE 5100	Oil / Gas Purchaser: PIONEER NATURAL RESOURCES		
HOUSTON, TEXAS 77002	Date: 12/08/2014		
Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR	Signature: Nancy Filzwalex		
Acknowledgment of Transfer: The above request for transfer of injection and noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	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		
	PRODUCTION JAN 2 1 2015 UIC JAN 2 1 2015		
Mail to: Past Operator New Operator	or District		

Side Two

Must Be Filed For All Wells

	No.: 202278				
Lease Name:	KLEIN R G		* Location:	NE Sec 23 Twp 30 Rge 3	5 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 N) (PROD/TA'D/Abandoned)
1-23	15-067-00184-0000	/ 1320 Circle	150 Circle	L GAS	PR
		FSL/FNL	FEL/FW	/L	
	<u> </u>	FSL/FNL	FEL/FW	/L	
		FSL/FNL	FEL/FW	/L	
		FSL/FNL	FEL/FW	'L	
		FSL/FNL	FEL/FW	/L	
		FSL/FNL	FEL/FW	<u>/L</u>	
		FSL/FNL	FEL/FW	/L	
		FSL/FNL	FEL/FW	/L	
		FSL/FNL	FEL/FW	/L	
		FSL/FNL	FEL/FW	/L	
		FSL/FNL	FEL/FW	/L	
		FSL/FNL	FEL/FW	/L	
		FSL/FNL	FEL/FW		
		FSL/FNL	FEL/FW	/L	
		FSL/FNL	FEL/FW	/L	
				KCC N	VICHITA
				חבר מ	0 2014
				REC	CEIVED
		FSL/FNL	FEL/FW	'L	

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

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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	(Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 4824	Well Location:		
Name: PIONEER NATURAL RES. USA INC.	E2 _ RE _ Sec. 23 _ Twp. 30 _ S. R. 35 East 🔀 West		
Name: PIONEER NATURAL RES. USA INC. Address 1: 5205 N O'CONNOR BLVD Address 2: SUITE 200	County: GRANT		
Address 2: SUITE 200	County: GRANT Lease Name: KLEIN R G Well #: 1-23		
Address 2: 3011	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: DALE BANKHEAD	the lease below:		
Phone: (972) 969-3886 Fax: (972) 969-3587			
Email Address: dale.bankhead@pxd.com	KCC WICHITA		
	DEC 3 0 2014		
Surface Owner Information:	RECEIVED		
Name: CLAWSON LAND PARTNERSHIP	When filing a Form T-1 involving multiple surface owners, attach an additiona		
Address 1: P.O. BOX 279	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.		
City: PLAINS State: KS Zip: 67869 +			
are preliminary non-binding estimates. The locations may be entered of Select one of the following:	k batteries, pipelines, and electrical lines. The locations shown on the plat n 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 A owner(s) of the land upon which the subject well is or will be I/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, a ✓ I have not provided this information to the surface owner(s). I a 	cknowledge that, because I have not provided this information, the		
task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the k	vner(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 KCC, which is enclosed with this form.		
task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the I If choosing the second option, submit payment of the \$30.00 handling	of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form. fee with this form. If the fee is not received with this form, the KSONA-1		
task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the I	of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form. fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		