### 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: Oil Lease: No. of Oil Wells \_ Effective Date of Transfer: 01/01/15 Gas Lease: No. of Gas Wells \_\_1 KS Dept of Revenue Lease No.: \_218749 Gas Gathering System: Lease Name: MOORHEAD Saltwater Disposal Well - Permit No.: \_\_\_ NW \_ SE \_ NE \_ SW Sec. 13 Twp. 31 R. 35 E / W feet from N / S Line Legal Description of Lease: \_ feet from E / W Line SW Sec 13 Twp 31 Rge 35 W Enhanced Recovery Project Permit No.: \_ Entire Project: Yes No County: STEVENS Number of Injection Wells \_ Production Zone(s): CHASE Field Name: HUGOTON GAS AREA Injection Zone(s):\_ \*\* Side Two Must Be Completed. Surface Pit Permit No.: 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 KH Burn Settling Haul-Off Workover Drilling 4824 Past Operator's License No. DALE BANKHEAD Contact Person: <del>KCC WI</del>CHITA PIONEER NATURAL RES. USA INC. Phone: 972-969-3886 Past Operator's Name & Address: DEC 3 0 2014 5205 N. O'CONNOR BLVD, SUITE 200 IRVING, TX 75039 12/08/2014 Title: CORPORATE ENGINEERING V.P. RECEIVED Signature: \_ 33999 🗸 Contact Person: NANCY FITZWATER New Operator's License No. \_ New Operator's Name & Address: LINN OPERATING, INC. Phone: 281-840-4266 600 TRAVIS, SUITE 5100 Oil / Gas Purchaser: ONEOK FIELD SERVICES HOUSTON, TEXAS 77002 Date: 12/08/2014 REGULATORY COMPLIANCE ADVISOR/SUPERVISOR Nancu Fitzwater Signature: \_ Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #\_ N/A 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: Authorized Signature DISTRICT \_\_ FPR Mail to: Past Operator **New Operator** 

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	No.: 218749				
* Lease Name:	MOORHEAD		* Location:	SW Sec 13 Twp 31 Rg	e 35 W
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet from		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
2-13	15-189-21518-0002	1935 Circle	3164 Circle	GAS	PR
		F\$L/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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		KCC WICHITA
			FEL/FWL		DEC 3 0 2014
			FEL/FWL		RECEIVED
	-		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.

### 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.

OPERATOR: License # 4824	_ Well Location:		
Name: PIONEER NATURAL RES. USA INC.	NW .SE .NE .SW Sec. 13 Twp. 31 S. R. 35 East X West		
Address 1: 5205 N O'CONNOR BLVD	County STEVENS		
Address 1: 5205 N O'CONNOR BLVD Address 2: SUITE 200	County: STEVENS  Lease Name: MOORHEAD Well #: 2-13		
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	the lease below:		
Phone: ( 972 ) 969-3886 Fax: ( 972 ) 969-3587 Email Address: dale.bankhead@pxd.com	- YCC WICHIT		
Email Address: dale.bankhead@pxd.com	KCC WICHITA		
·	DEC 3 0 2014		
Surface Owner Information:	RECEIVED		
Name: J I CULLISON	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 1: RT 1 BOX 104			
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: MOSCOW State: KS Zip: 67952 +	,		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath	hodic Protection Borohole Intent), you must cumb the surface and		
are preliminary non-binding estimates. The locations may be entered	hodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat I on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice 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 otask, I acknowledge that I must provide the name and address.	hodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat I on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form in being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  acknowledge that, because I have not provided this information, the powner(s). To mitigate the additional cost of the KCC performing this set of the surface owner by filling out the top section of this form and		
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice 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 ot task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the	Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, the plat(s) required by this and email address.  Acknowledge that, because I have not provided this information, the powner(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 except the with this form.		
Acre preliminary non-binding estimates. The locations may be entered select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice 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 task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the following 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 CB-1 are presented.	Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form in being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this so of the surface owner by filling out the top section of this form and eKCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1 P-1 will be returned.		
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice 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 ot task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the following the second option, submit payment of the \$30.00 handling fee that I must provide the same and address that I am being charged a \$30.00 handling fee, payable to the following the second option, submit payment of the \$30.00 handling fee that I must provide the same and address that I am being charged a \$30.00 handling fee, payable to the following the second option, submit payment of the \$30.00 handling fee.	Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, the plat(s) required by this and email address.  acknowledge that, because I have not provided this information, the powner(s). To mitigate the additional cost of the KCC performing this ses of the surface owner by filling out the top section of this form and exercise with this form. If the fee is not received with this form, the KSONA-1 will be returned.		