Kansas Corporation Commission Oil & Gas Conservation Division

Form 1-1 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: | mitted 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.: 216672 | | |
| Gas Gathering System: | Lease Name: MOSSBARGER G H | | |
| Saltwater Disposal Well - Permit No.: | SESE NW _ NW Sec. 22 Twp. 29 R. 34 E W | | |
| Spot Location: feet from N / S Line | | | |
| feet from E / W Line | Legal Description of Lease: | | |
| Enhanced Recovery Project Permit No.: | NW Sec 22 Twp 29 Rge 34 W | | |
| Entire Project: Yes No | County: HASKELL | | |
| Number of Injection Wells ** | Production Zone(s): CHASE GROUP | | |
| Field Name: HUGOTON GAS AREA | Injection Zone(s): | | |
| ** Side Two Must Be Completed. | | | |
| 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 KH | | |
| | | | |
| 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 | Date: 12/08/2014 KCC WICHITA | | |
| Title: CORPORATE ENGINEERING V.P. | Signature: DEC 3 0 2014 | | |
| New Operator's License No | Contact Person: NANCY FITZWATER RECEIVED | | |
| 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 | Name Situation | | |
| Title: | Signature: | | |
| Acknowledgment of Transfer: The above request for transfer of injection | on authorization, surface pit permit # N/A has been | | |
| noted, approved and duly recorded in the records of the Kansas Corporation | on Commission. This acknowledgment of transfer pertains to Kansas Corporation | | |
| Commission records only and does not convey any ownership interest in the | ne 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 | Date: | | |
| DISTRICT EPR | PRODUCTION JAN 2 1 2015 UIC JAN 2 1 2015 | | |
| Mail to: Past Operator New Oper | 11050011011 - 110110110110110110110110110110110110110 | | |
| | | | |

Side Two

Must Be Filed For All Wells

| KDOR Lease | No.: 216672 V | | | | |
|---------------|------------------------------|---|--------------|-----------------------------------|--------------------------------------|
| * Lease Name: | MOSSBARGER G H | | * Location:N | IW Sec 22 Twp 29 Rge | 934 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 (PROD/TA'D/Abandoned) |
| 4-22 | 15-081-20585-0000/ | 4005 Circle | 4023 Circle | GAS | PR |
| | | FSL/FNL | FEL/FWL | | |
| | | FSL/FNL | FEL/FWL | | |
| | | FSL/FNL | FEL/FWL | | |
| | | FSL/FNL | FEL/FWL | _ | _ |
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| | | FSL/FNL | FEL/FWL | | |
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| | | FSL/FNL | FEL/FWL | | |
| | | FSL/FNL | FEL/FWL | | _ |
| | | FSL/FNL | FEL/FWL | | |
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| | | | | d d | CC WICHITA |
| | | | | | DEC 3 0 2014 |
| | | FSL/FNL | FEL/FWL | | RECEIVED |
| | | FSL/FNL | FEL/FWL | | |
| | | FSL/FNL | FEL/FWL | | _ |
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| | | FSL/FNL | FEL/FWL | | |
| | | FSL/FNL | FEL/FWL | | |
| | | FSL/FNL | FEL/FWL | | _ |
| | | FSL/FNL | FEL/FWL | | |

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.

| ODERATOR: 1: # 4824 | Mall Leasting | | | |
|--|--|--|--|--|
| OPERATOR: License # 4824 Name: PIONEER NATURAL RES. USA INC. Address 1: 5205 N O'CONNOR BLVD Address 2: SUITE 200 | Well Location: SE _SE _NW_ NW Sec. 22 Twp. 29 S. R. 34 East X West | | | |
| Address 1, 5205 N O'CONNOR BLVD | County: HASKELL Lease Name: MOSSBARGER G H Well #: 4-22 | | | |
| Address 2: SUITE 200 | | | | |
| City: IRVING State: TX 7ip: 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 | | | | |
| City: IRVING State: TX Zip: 75039 + Contact Person: DALE BANKHEAD Phone: (972) 969-3886 Fax: (972) 969-3587 Email Address: dale.bankhead@pxd.com | KCC WICHITA | | | |
| Email Address: dale.bankhead@pxd.com | DEC 3 0 2014 | | | |
| Surface Owner Information: | RECEIVED | | | |
| Name: ROBERT BARNHARDT JR | When filing a Form T-1 involving multiple surface owners, attach an additiona | | | |
| Name: ROBERT BARNHARDT JR Address 1: P.O. BOX188 | 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: BUCKLIN State: KS Zip: 67834 + | - | | | |
| are preliminary non-binding estimates. The locations may be entered | 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. | | | |
| owner(s) of the land upon which the subject well is or will be | Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. | | | |
| 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 | | | |
| task, I acknowledge that I must provide the name and addres that I am being charged a \$30.00 handling fee, payable to the | | | | |
| that I am being charged a \$30.00 handling fee, payable to the | KCC, which is enclosed with this form. g fee with this form. If the fee is not received with this form, the KSONA-1 | | | |
| that I am being charged a \$30.00 handling fee, payable to the If choosing the second option, submit payment of the \$30.00 handling | KCC, which is enclosed with this form. g fee with this form. If the fee is not received with this form, the KSONA-1 2-1 will be returned. | | | |
| that I am being charged a \$30.00 handling fee, payable to the 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 CF | KCC, which is enclosed with this form. g fee with this form. If the fee is not received with this form, the KSONA-1 2-1 will be returned. to the best of my knowledge and belief. | | | |