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:	itea with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 1/1/2015 KS Dept of Revenue Lease No.: 208105 Lease Name: NAFZIGER			
Gas Lease: No. of Gas Wells**				
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	<u>SW_Sec. 2</u> Twp. 29 R. 37 E W			
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	SW Sec 2 Twp 29 Rge 37 W			
Entire Project: Yes No	County: GRANT			
Number of Injection Wells**	Production Zone(s): COUNCIL GROVE Injection Zone(s):			
Field Name: PANOMA GAS AREA				
** 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)				
Type of Pit: Emergency Burn Settling	feet from ☐ E / ☐ W Line of Section Haul-Off Workover Drilling ⊀⊀			
Type of the Line gency built				
Past Operator's License No	Contact Person: DALE BANKHEAD			
Past Operator's Name & Address: PIONEER NATURAL RES. USA INC.	Phone: 972-969-3886 Date: 12/08/2014 Received KANSAS CORPORATION COMMISSION			
5205 N. O'CONNOR BLVD, SUITE 200 IRVING, TX 75039				
Title: CORPORATE ENGINEERING V.P.				
Title:	Signature: DEC 3 0 2014			
New Operator's License No. 33999	NANCY EITZWATED CONSERVATION DIVIS			
	Willia, KS			
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			
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.:			
Doto	Data			
Date: Authorized Signature	Date:			
DISTRICT EPR _/-20-/5	PRODUCTION JAN 2 1 2015 UICJAN 2 1 2015			
•	orDistrict			
· ·				

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 208105				
			* Location:	SW Sec 2 Twp 29 Rge 3	7 W
Well No. API No. Footage from Ser (YR DRLD/PRE '67) (i.e. FSL = Feet from			Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
2-3R	15-067-21467-0001	1250 Circle	1490 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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	KANSA	Received
		FSL/FNL	FEL/FWL		Received S CORPORATION COMMISSION DEC 3 0 2014
		FSL/FNL	FEL/FWL	CONS	SERVATION -
		FSL/FNL	FEL/FWL		WICHITA, KS
		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.

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	Moll Looption.
Name: PIONEER NATURAL RES. USA INC.	Well Location:
Address 1, 5205 N O'CONNOR BLVD	County: GRANT
Address 2: SUITE 200	Lease Name: NAFZIGER Well #: 2-3R
City IRVING City TX 7: 75039	Lease Name: weil #:
Contact Dance DALE BANKHEAD	— If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Name: PIONEER NATURAL RES. USA INC. Address 1: 5205 N O'CONNOR BLVD Address 2: SUITE 200 City: IRVING State: TX Zip: 75039 + Contact Person: DALE BANKHEAD Phone: (972) 969-3886 Fax: (972) 969-3587	
Email Address: dale.bankhead@pxd.com	Received KANSAS CORPORATION COMMISSIO
Email Address:	
	DEC 3 0 2014
Surface Owner Information:	CONSERVATION DIVISION WICHITA, KS
Name: JOY MARIE RUSHFELT	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 9845 OVERBROOK CT	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: LEAWOOD State: KS Zip: 66206 +	
	ads, tank batteries, pipelines, and electrical lines. The locations shown on the plat ntered on 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 I owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number ✓ I have not provided this information to the surface owner KCC will be required to send this information to the surfack, I acknowledge that I must provide the name and 	er(s). I acknowledge that, because I have not provided this information, the inface owner(s). To mitigate the additional cost of the KCC performing this address of the surface owner by filling out the top section of this form and
that I am being charged a \$30.00 handling fee, payable If choosing the second option, submit payment of the \$30.00 h form and the associated Form C-1, Form CB-1, Form T-1, or Fo	nandling 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 co	orrect to the best of my knowledge and belief.
12/08/2014	Corporate Engineering V.P.
Date: Signature of Operator or Agent:	Title: