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,
MIST be submitted with this form.

	Check Applicable Boxes: MUST be submi	itted with this form.			
Gas Gathering System: Gas Gathering System: Gas Gathering System: Spot Location: Spot Row Must Be Completed. Spot Production Zone(s): Spot Location: Spot Production Zone(s): Spot North Must Be Completed. Spot Spot Must Spot Must Be Completed. Spot Spot Must Be Completed. Spot Spot Must Sp	Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 1/1/2015			
Sativater Disposal Well - Permit No.: Spot Location: feet from N / S Line feet from E / W Line Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells W Line Entire Project: Yes No Number of Injection Wells W Line Field Name: PANOMA GAS AREA "Side Two Must Be Completed. Surface Pit Permit No.: N/A Surface Pit Permit No.: N/A Surface Pit Permit No.: N/A April No. It Dail Pit, WO or Haud (APT No. It Dail Pit, WO or Haud April No. AB24 / Peat Operator's Lionase No. 4824 / Peat Operator's Lionase No. 4824 / Peat Operator's Name & Address: PIONEER NATURAL RES. USA INC. S205 N. O'CONNOR BLUDD, SUITE 200 IRVING, TX 75039 Title: CORPORATE ENGINEERING V.P. New Operator's Name & Address: LINN OPERATING, INC. 600 TRAVIS, SUITE 5100 HOUSTON, TEXAS 770002 Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # N/A Acknowledgment of Transfer: The above request for transfer of injection well(s) or pit permit # N/A Acknowledgment of Transfer: Is acknowledged as the new operator of the above named lease containing the surface pit permit No: Recommended action: Date: Authorized Signature Date: Authori	Gas Lease: No. of Gas Wells**				
Saltwater Disposal Well - Permit No: Spot Location: feet from N / S Line feet from E / W Line Filter Project: Yes No Number of Injection Wells Filter Name: PANOMA GAS AREA Filed Name: PANOMA GAS AREA Fi	Gas Gathering System:	Lease Name: ROBINSON			
Spot Location:	Saltwater Disposal Well - Permit No.:				
Enhanced Recovery Project Permit No: Entire Project: Yes No Number of Injection Wells Production Zone(s): COUNCIL GROVE GROUP Injection Zone(s): COUNCIL GROVE GROUP Injection Zone(s): COUNCIL GROVE GROUP Injection Zone(s): Telef from N / S Line of Section Injection Zone(s): Telef fro	Spot Location: feet from N / S Line				
Entire Project: Yes No Number of Injection Wells Field Name: PANOMA GAS AREA **Side Two Must Be Completed.** Surface Pit Permit No: N/A (API No. II Drill Pit, WO or Haul) (API No. II Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling KA Past Operator's License No. 4824 / Contact Person: DALE BANKHEAD Past Operator's Name & Address: PIONEER NATURAL RES. USA INC. 5205 N. O'CONNOR BLVD, SUITE 200 IRVING, TX 75039 Title: CORPORATE ENGINEERING V.P. New Operator's License No. 33999 / Contact Person: NAME & Address: LINN OPERATING, INC. 900 TRAVIS, SUITE 5100 HOUSTON, TEXAS 77002 HOUSTON, TEXAS 77002 Title: PEGULATORY COMPLIANCE ADVISOR/SUPERVISOR Signature: PIONEER NATURAL RESOURCES John Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit. Is acknowledged as the new operator of the above named lease containing the surface pit permit bo: Recommended action: Date: Authorized Signature Authorized Signature Date: Authorized Signature Authorized Signature CONNOCIONES IN AND 2 3 215	feet from E / W Line	1			
Number of Injection Wells PROMA GAS AREA "Side Two Must Be Completed. NA Surface Pit Permit No. NA Surface Pit Permit No. NA feet from N / S Line of Section feet from E / W Line of Section feet from E / W Line of Section feet from M / S Line of Section feet fro	Enhanced Recovery Project Permit No.:				
Number of Injection Wells PROMA GAS AREA "Side Two Must Be Completed. NA Surface Pit Permit No. NA Surface Pit Permit No. NA feet from N / S Line of Section feet from E / W Line of Section feet from E / W Line of Section feet from M / S Line of Section feet fro	Entire Project: Yes No				
Injection Zone(s): Surface Pit Permit No. N/A	Number of Injection Wells**				
Surface Pit Permit No.: N/A Surface Pit Permit No.: N/A	Field Name: PANOMA GAS AREA				
Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling		injection Zone(s):			
Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling	Surface Pit Permit No. N/A	feet from N/ S Line of Section			
Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling All Past Operator's License No. 4824 / Contact Person: DALE BANKHEAD Phone: 972-969-3886 Date: 12/08/2014 Contact Person: DALE BANKHEAD Phone: 972-969-3886 Date: 12/08/2014 Contact Person: DALE BANKHEAD Phone: 972-969-3886 Date: 12/08/2014 Contact Person: DEC 3 0 2014 Contact Person: Name & Address: Linn Operating Inc. 972-969-3886	(API No. if Drill Pit, WO or Haul)				
Past Operator's License No. 4824 / Contact Person: DALE BANKHEAD Past Operator's Name & Address: PIONEER NATURAL RES. USA INC. 5205 N. O'CONNOR BLVD, SUITE 200 IRVING, TX 75039 Title: CORPORATE ENGINEERING V.P. New Operator's License No. 33999 / Contact Person: NANCY FITZWATER RECEIVED New Operator's Name & Address: LINN OPERATING, INC. 600 TRAVIS, SUITE 5100 HOUSTON, TEXAS 77002 Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR 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 records only and does not convey any ownership interest in the above injection well(s) or pit permit. Is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No: Recommended action: Date: Authorized Signature Authorized Signature Authorized Signature Contact Person: DALE BANKHEAD Phone: 972-969-3886 Date: 12/08/2014 Signature: NANCY FITZWATER RECEIVED NANCY FITZWATER RECEIVED	To at Dit. Sottling				
Past Operator's Name & Address: PIONEER NATURAL RES. USA INC. 5205 N. O'CONNOR BLVD, SUITE 200 IRVING, TX 75039 Title: CORPORATE ENGINEERING V.P. Signature: Signature: DEC 3.0 2014 New Operator's License No. 33999 / Contact Person: NANCY FITZWATER RECEIVED New Operator's Name & Address: LINN OPERATING, INC. 600 TRAVIS, SUITE 5100 HOUSTON, TEXAS 77002 Date: 12/08/2014 Signature: NANCY FITZWATER RECEIVED Nancy Fitzwater Pioneer Natural Resources Nancy Fitzwater Received Nancy Fitzwater Nancy Fitzwater Pioneer Natural Resources Nancy Fitzwater Received Nancy Fitzwater Received Nancy Fitzwater Nancy Fitzwater Pioneer Natural Resources Nancy Fitzwater Nancy Fitzwater Pioneer Natural Resources Nancy Fitzwater Nancy Fitzwater Pioneer Natural Resources Nancy Fitzwater Nancy Fitzwater Nancy Fitzwater Pioneer Natural Resources Nancy Fitzwater Nancy Fitzwater Nancy Fitzwater Pioneer Pioneer Natural Resources Nancy Fitzwater Nancy Fitzwater Nancy Fitzwater Pioneer Pi	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Date: 12/08/2014 Signature: DEC 3.0 2014 New Operator's License No. 33999 / Contact Person: NANCY FITZWATER RECEIVED New Operator's Name & Address: LINN OPERATING, INC. 600 TRAVIS, SUITE 5100 Oil / Gas Purchaser: PIONEER NATURAL RESOURCES HOUSTON, TEXAS 77002 Date: 12/08/2014 Signature: NAMCY FITZWATER RECEIVED New Operator's Name & Address: LINN OPERATING, INC. 600 TRAVIS, SUITE 5100 Oil / Gas Purchaser: PIONEER NATURAL RESOURCES HOUSTON, TEXAS 77002 Date: 12/08/2014 Signature: Nancy Structure Signature: NANCY FITZWATER RECEIVED NANCY FITZWATER PORTAL PARTICLES SIDEAL PARTICLES SI	Past Operator's License No. 4824 /				
Detail: 12/08/2014 Signature: Plone: 281-840-4266 Oil / Gas Purchaser: Ploner NATURAL RESOURCES Date: 12/08/2014 Signature: Mancy Structure Signature: Mancy Structure Signature: NANCY FITZWATER RECEIVED NANCY FITZWATER NANCY FIT	Past Operator's Name & Address: PIONEER NATURAL RES. USA INC.				
Title: CORPORATE ENGINEERING V.P. Signature: DEC 3.0 2014 New Operator's License No. 33999 / Contact Person: NANCY FITZWATER RECEIVED New Operator's Name & Address: LINN OPERATING, INC. 600 TRAVIS, SUITE 5100 Oil / Gas Purchaser: PIONEER NATURAL RESOURCES HOUSTON, TEXAS 77002 Date: 12/08/2014 Signature: Mancy Sitzwates. 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. Lis acknowledged as is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No: Recommended action: Date: Authorized Signature Date: Authorized Signature Authorized Signature LINN OPERATING, INC. Phone: 281-840-4266 Oil / Gas Purchaser: PIONEER NATURAL RESOURCES Dill / Gas Purchaser: PIONEER NATURAL RESOURCES Nancy Sitzwates NANCY FITZWATER RECEIVED NANCY FITZWATER RECEIVED NANCY FITZWATER RECEIVED NANCY FITZWATER RECEIVED NANCY FITZWATER RECEIVED Date: Authorized Signature Date: Authorized Signature Authorized Signature Authorized Signature		Date: 12/08/2014			
New Operator's License No. New Operator's Name & Address: LINN OPERATING, INC. 600 TRAVIS, SUITE 5100 HOUSTON, TEXAS 77002 Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR 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.	CORPORATE ENGINEERING V.P.	Mra NOC WICH!			
New Operator's Name & Address: LINN OPERATING, INC. Phone: 281-840-4266 600 TRAVIS, SUITE 5100 HOUSTON, TEXAS 77002 Date: 12/08/2014 Signature: 12/08/2014 Mancy Sitzurates. Phone: 281-840-4266 Oil / Gas Purchaser: PIONEER NATURAL RESOURCES Date: 12/08/2014 Signature: 12/08/2014 Signature: 12/08/2014 Mancy Sitzurates. N/A	Title:	DEC 3.0 2014			
New Operator's Name & Address: LINN OPERATING, INC. Phone: 281-840-4266 600 TRAVIS, SUITE 5100 HOUSTON, TEXAS 77002 Date: 12/08/2014 Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR Signature: Manage 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 the new operator and may continue to inject fluids as authorized by Permit No:	New Operator's License No. 33999	Contact Person: NANCY FITZWATER RECEIVED			
HOUSTON, TEXAS 77002 Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR 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.	New Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4266			
HOUSTON, TEXAS 77002 Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR Signature:					
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.					
Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #N/Ahas 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.					
Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #	Title: HEGULATORY COMPLIANCE ADVISOR/SUPERVISOR	Signature:			
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.	Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit # N/A has been			
Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.					
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action: Date: Authorized Signature	Commission records only and doos not convey any emissions mentioned				
Permit No.: Permitted by No.:	is acknowledged as	is acknowledged as			
Permit No.:	the new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface pit			
Date: Date: Authorized Signature		permitted by No.:			
Authorized Signature Authorized Signature Authorized Signature Authorized Signature Authorized Signature Authorized Signature	. Hotominando dolon.				
Authorized Signature Authorized Signature Authorized Signature Authorized Signature Authorized Signature	Date:	Date:			
DISTRICT EPR /-22-15 PRODUCTION JAN 2 3 2015 UICLAN 2 3 70 13					
	DISTRICT EPR /-22-15	PRODUCTION JAN 2 3 2015 UICLAN 2 3 70 13			

Side Two

Must Be Filed For All Wells

	No.: 208125			No Sec 5 Twn 30 Rde 3	7 W
Lease Name:	ROBINSON		* Location:v	V2 Sec 5 Twp 32 Rge 3), AA
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
2-5	15-189-20082-0000	Circle 2600 FSL/RDL	Circle 1320 FEL/FWD	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	V	CC WALLET
		FSL/FNL	FEL/FWL		CC WICHITA
		50. / 5 1.1			
		ECL/ENU			
		EQL /EAL			
		=======================================			
-					
		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) T-1 (Transfer) CP-1 (Plugging Application)					
OPERATOR: License # 4824	Well Location:				
Name: PIONEER NATURAL RES. USA INC.					
OPERATOR: License #_4024 Name: PIONEER NATURAL RES. USA INC. Address 1: 5205 N O'CONNOR BLVD Address 2: SUITE 200	OWELLE LO				
Address 2. SUITE 200	County: STEVENS Lease Name: ROBINSON Well #: 2-5				
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: KCC WICHITA DEC 3 0 2014				
O A A D 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					
Surface Ourse Information.	RECEIVED				
Surface Owner Information: Name: LARRY RANDLE REV TRUST	When filing a Form T.1 involving multiple surface owners, attach an additional				
Address 1: 1151 ROAD X	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				
	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.				
Address 2:	3				
City: State: zip+					
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: I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be location CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form leing 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 ow 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	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	fee with this form. If the fee is not received with this form, the KSONA-1 I will be returned.				
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.				
Date: Signature of Operator or Agent:	Title:				