# 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:	ibmitted with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 1/1/2015		
Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: _215372   Lease Name: TROTTER  NW _ NW _ SE _ SE Sec25 Twp31 R38		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	Legal Description of Lease:		
feet from E / W Line	SE Sec 25 Twp 31 Rge 38 W		
Enhanced Recovery Project Permit No.:	County: STEVENS Production Zone(s): CHASE GROUP		
Entire Project: Yes No			
Number of Injection Wells**			
Field Name: HUGOTON GAS AREA	Injection Zone(s):		
** Side Two Must Be Completed.			
Surface Pit Permit No.: N/A  (API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section		
	feet fromE /W Line of Section		
Type of Pit: Emergency Burn Settling	∐ Haul-Off		
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	Received		
Title: CORPORATE ENGINEERING V.P.	May 20 2016		
Title:			
New Operator's License No. 33999	Conservation Division Contact Person:NANCY FITZWATER		
New Operator's License No.	004 040 4066		
New Operator's Name & Address: LINN OPERATING, INC. 600 TRAVIS, SUITE 5100			
	Oil / Gas Purchaser: PIONEER NATURAL RESOURCES		
HOUSTON, TEXAS 77002	Date:		
Title: REGULATORY COMPLIANCE ADVISOR/SUPERVISOR	Signature:		
	tion outhorization outfoco nit normit # N/A has been		
Acknowledgment of Transfer: The above request for transfer of injections and the second secon	cition authorization, surface pit permit #nas been		
	ation 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 I	by the new operator of the above named lease containing the surface pit		
Permit No.: Recommended action:	permitted by No.:		
Data	 Date:		
Date: Authorized Signature	Authorized Signature		
DISTRICT EPR /-22-/5			
Mail to: Past Operator New Operator			

## Side Two

#### Must Be Filed For All Wells

KDOR Lease No.: 215372						
Lease Name:	TROTTER		* Location:S	SE Sec 25 Twp 31 Rge 3	8 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)	
3-25	15-189-21235-0000	1250 Circle	1250 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			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
			FEL/FWL			
			FEL/FWL		Received	
		FSL/FNL	FEL/FWL		CORPORATION COMMISSION DEC 3 0 2014	
		FSL/FNL	FEL/FWL	-	ISERVATION DIVISION	
		FSL/FNL	FEL/FWL		WICHITA, KS	
		EQL/ENI			_	
		FOL/FNI				
		<del></del>				
	N					
		FOL/FINL	FGL/FVVL			

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.

Select the corresponding form being filed: C-1 (Intent) CB-1	1 (Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 4824 Name: PIONEER NATURAL RES. USA INC.	Well Location:		
	NW_NW_SE_SE_Sec. 25 Twp. 31 S. R. 38 East west		
Address 1: 5205 N O'CONNOR BLVD	County: STEVENS		
Address 2: SUITE 200	Lease Name: TROTTER Well #: 3-25  If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:  Received  KANSAS CORPORATION COMMISSION		
City: IRVING State: TX Zip: 75039 +			
Contact Person: DALE BANKHEAD  Phone: ( 972 ) 969-3886			
Phone: ( 972 ) 909-3000 Fax: ( 972 ) 909-3007			
Email Address: dale.bankhead@pxd.com	DEC 3 0 2014		
Surface Owner Information:	CONSERVATION DIVISION WICHITA, KS		
Name: CAROL QUILLEN	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: 2343 RD 11	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: HUGOTON State: KS Zip: 67951 +			
the KCC with a plat showing the predicted locations of lease roads, tal	nodic Protection Borehole Intent), you must supply the surface owners and 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.		
<ul> <li>✓ 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,</li> <li>☐ I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of</li> </ul>	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		
	g 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 correct	to the best of my knowledge and belief.		
12/08/2014  Date: Signature of Operator or Agent:			
Date: Signature of Operator or Agent: AUA	Title:		