## 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: MUST be subm	itted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: _208176			
Gas Gathering System:	Lease Name: YOUNGREN			
Saltwater Disposal Well - Permit No.:				
Spot Location:feet from N / S Line	SE _ SE _ NW _ NW Sec11 _ Twp32R39 E W			
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	NW Sec 11 Twp 32 Rge 39 W			
Entire Project: Yes No	County: STEVENS  Production Zone(s): COUNCIL GROVE GROUP			
Number of Injection Wells **				
Field Name: PANOMA GAS AREA				
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.: N/A  (API No. if Drill Pit, WO or Haul)  Type of Pit: Burn Settling	feet from N / S Line of Section  feet from E / W Line of Section  Haul-Off Workover Drilling			
Past Operator's License No. 4824	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:			
New Operator's License No	Contact Person: NANCY FITZWATER			
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:			
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation			
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:	Date:			
Date:	Authorized Signature			
DISTRICT EPR /2215	PRODUCTION JAN 2 3 2315 UIQ AN 2 3 2015			
Mail to: Past Operator New Operator	AIV			

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease No.: 208176					
* Lease Name:	YOUNGREN		* Location:	NW Sec 11 Twp 32 Rge	39 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)
2-14	15-189-20101-0000	1250 Circle	1250 Circle	GAS	PR
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEL/FWL	<del></del>	
		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		KCC WICHITA
					UEC 3 0 2014
					* AFOLIVED
		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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (C	athodic Protection Borehole Intent) 🗵 T-1 (Transfer) 🗌 CP-1 (Plugging Application)		
OPERATOR: License # 4824	Well Location:		
Name: PIONEER NATURAL RES. USA INC.	SE _SE _NW_ NW Sec. 11 Twp. 32 S. R. 39 East X West		
Name: PIONEER NATURAL RES. USA INC.  Address 1: 5205 N O'CONNOR BLVD  Address 2: SUITE 200			
Address 2: SUITE 200	County: STEVENS  Lease Name: YOUNGREN Well #: 2-14		
City: IRVING State: TX 7ip: 75039	If filing a Form T-1 for multiple wells on a lease, enter the legal description o		
Contact Person: DALE BANKHEAD	the lease below:		
City: IRVING State: TX Zip: 75039 + Contact Person: DALE BANKHEAD  Phone: ( 972 ) 969-3886 Fax: ( 972 ) 969-3587	KCC WICHITA		
Email Address: dale.bankhead@pxd.com	DEC 3 0 2014		
	RECEIVED		
Surface Owner Information:	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
Name: KAY ANITA YOUNGREN MURRY Address 1: PO BOX 548	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		
Address 1: PO BOX 548			
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, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:			
<ul> <li>✓ I certify that, pursuant to the Kansas Surface Owner Notice Adowner(s) of the land upon which the subject well is or will be lo CP-1 that I am filing in connection with this form; 2) if the form b form; and 3) my operator name, address, phone number, fax, an</li> <li>☐ I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I must provide the name and address</li> </ul>	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this id email address.  knowledge that, because I have not provided this information, the 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		
that I am being charged a \$30.00 handling fee, payable to the K 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	ee 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: Data	Title:		