District

#### 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: 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.: 208177 Gas Gathering System: Lease Name: YOUNGREN Saltwater Disposal Well - Permit No.: \_\_\_\_ \_\_ feet from N / S Line Legal Description of Lease: \_ \_\_ feet from | E / | W Line SE SEC 15 TWP 32 R39 W Enhanced Recovery Project Permit No.: \_\_ Entire Project: Yes No County: STEVENS Number of Injection Wells Production Zone(s): COUNCIL GROVE Field Name: PANOMA GAS FIELD 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 Past Operator's License No. DALE BANKHEAD Contact Person: PIONEER NATURAL RES. USA INC. Phone: 972-969-3889 FOR QUESTIONS, CALL VIRGINIA TIJERINA 972-969-5837 Past Operator's Name & Address: \_ 5205 N. O'CONNOR BLVD, SUITE 200 IRVING, TX 75039 12/08/2014 Title: CORPORATE ENGINEERING V.P. Dra-KCC WICHITA Signature: \_ FEB 02 33999 / Contact Person: NANCY FITZWATER New Operator's License No. -New Operator's Name & Address: LINN OPERATING, INC. RECEIVED Phone: 281-840-4266 600 TRAVIS, SUITE 5100 Oil / Gas Purchaser: HOUSTON, TEXAS 77002 Date: \_12/08/2014 REGULATORY COMPLIANCE ADVISOR/SUPERVISOR Nancy Fitzwater Signature: \_ N/A Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #\_ 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 \_\_\_\_\_ . Recommended action: Permit No.: permitted by No.: \_\_\_\_\_ Date: Date: Authorized Signature FEB 0 4 2015 DISTRICT \_ PRODUCTION Mail to: Past Operator \_

#### Side Two

### Must Be Filed For All Wells

KDOR Lease	No.: 208177		<del>_</del>		
* Lease Name:	YOUNGREN		* Location:	SE SEC 15 TWP 32 R39	9 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)
2-15	15-189-20086-0000 <sup>√</sup>	1400 Circle	1400 Circle	GAS	TA'D
		FSL/FNL	FEL/FWL		<u> </u>
		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		
<del></del>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
<del></del>		FSL/FNL	FEL/FWL		
		FSL/FNL			KCC WICHIT
		FSL/FNL	FEL/FWL		FEB 0 2 2015
		FSL/FNL	FEL/FWL		RECEIVED
		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 _		

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	Cathodic Protection Borehole Intent) X T-1 (Tran	nsfer) CP-1 (Plugging Application)	
4824				
OPERATOR: License # 4824  Name: PIONEER NATURAL RES. USA INC.  Address 1: 5205 N O'CONNOR BLVD  Address 2: SUITE 200		Well Location:		
Name: TIONEEN NATIONAL RES. USA INC.				
Address 1: 3203 N O CONNOR BLVD		County: STEVENS		
Address 2: SUITE 200  City: IRVING State: TX Zip: 7		County: STEVENS Lease Name: YOUNGREN	Well #: 2-15	
City: IRVING State: IX Zip: //	5039	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person: DALE BANKHEAD For questions call	Virginia 972-969-5837			
Contact Person: DALE BANKHEAD For questions call Phone: ( 972 ) 969-3889 Fax: ( 972	969-3587			
Email Address: dale.bankhead@pxd.com				
KC	C WICHITA			
Surface Owner Information:         F           Name:         DAVE BOZONE           Address 1:         176 RD R	EB 0 2 2015	Mar St. 5 Tal.		
Address 1: 176 RD R RECEIVED		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:State: KSZip: 6	7054	county, and in the real estate property ta.	x records or the county treasurer.	
City: State: No Zip: Office Zi	+			
If this form is being submitted with a Form C-1 (It the KCC with a plat showing the predicted location are preliminary non-binding estimates. The location is select one of the following:  I certify that, pursuant to the Kansas Suramer(s) of the land upon which the subject CP-1 that I am filing in connection with the form; and 3) my operator name, address,  I have not provided this information to the KCC will be required to send this informations, I acknowledge that I must provide the	rface Owner Notice A ect well is or will be lo is form; 2) if the form the phone number, fax, and surface owner(s). I are tion to the surface owner and address	ct (House Bill 2032), I have provided the boated: 1) a copy of the Form C-1, Form CB-1, the enail address.  cknowledge that, because I have not property. To mitigate the additional cost of the surface owner by filling out the to	The locations shown on the plat a separate plat may be submitted.  The following to the surface of CB-1, Form T-1, or Form the plat(s) required by this avided this information, the fight for the KCC performing this	
that I am being charged a \$30.00 handling.  If choosing the second option, submit payment or form and the associated Form C-1, Form CB-1, F  I hereby certify that the statements made herein a	f the \$30.00 handling orm T-1, or Form CP-	fee with this form. If the fee is not receing the second will be returned.	ved with this form, the KSONA-1	
12/08/2014	Agent: Dra	2	porate Engineering V.P.	
Date: Signature of Operator or	Agent: KUK	Title:		