KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**

Check Applicable Boxes:

Gas Gathering System: __

Entire Project: Yes No

Number of Injection Wells _____

Field Name: _

Type of Pit:

Title:

Title: ____

Surface Pit Permit No.: ____

Past Operator's License No.

New Operator's License No.

New Operator's Name & Address: ____

Past Operator's Name & Address: ____

Oil Lease: No. of Oil Wells _____

Gas Lease: No. of Gas Wells _____

Saltwater Disposal Well - Permit No .: _____

Enhanced Recovery Project Permit No.: _____

Emergency

** Side Two Must Be Completed.

(API No. if Drill Pit, WO or Haul)

Burn

KOLAR Document ID: 1416452 Form T-1 July 2014 Form must be Typed Form must be Signed **REQUEST FOR CHANGE OF OPERATOR** All blanks must be Filled 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. Effective Date of Transfer: ____ KS Dept of Revenue Lease No.: _____ Lease Name: _ - -_Sec. _____Twp. _____R. ____ E W Spot Location: ______ feet from N / S Line Legal Description of Lease: feet from E / W Line County: _____ Production Zone(s): Injection Zone(s):____ ____ feet from ____ N / ___ S Line of Section Ε/ W Line of Section feet from Settling Haul-Off Workover Drilling Contact Person: _____ Phone: _ Date: __ Signature: ____ Contact Person: ____ Phone: ____ Oil / Gas Purchaser: Date: Signature: ____

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #____ _____ 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.:
Date:	Date: Authorized Signature
DISTRICT EPR	PRODUCTION UIC

Side Two

Must Be Filed For All Wells

* Lease Name:			* Location:		
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)
		<i>Circle</i> FSL/FNL	<i>Circle</i> 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		
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		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		
		FOL/FINL			

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.

KOLAR Document ID: 1416452

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

Form KSONA-
July 201
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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 #	Well Location:			
Name:				
Address 1:	County:			
Address 2:	Lease Name: Well #:			
City: State: Zip:+	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Contact Person:				
Phone: () Fax: ()				
Email Address:				
Surface Owner Information:				
Name:	When filing a Form T-1 involving multiple surface owners, attach an additional			
Address 1:	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: State: Zip:+				

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and 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 to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: ______ Signature of Operator or Agent: ______

Bill of Sale

FOR VALUE RECEIVED, the undersigned <u>Sterling Hall</u>

of <u>Sublette Enterprises, Inc.</u> hereby sells and transfers unto Steven Arndt of Sublette Feeders, LLC (Buyer), and its successors and assigns forever, the following described goods and chattels: Gas Leases Titled: Bale, Holloway, McColm, Spanier, Sublette Feeders Seller warrants and represents that he/she has good title to said property, full Authority to sell and transfer same and that said goods and chattels are being sold Free and clear or all liens, encumbrances, liabilities and adverse claims, of every nature And description.

Seller further warrants that it shall sully defend, protect, indemnify and save harmless the Buyer and its lawful successors and assigns from any and all adverse claim, that may be made by any party against said goods.

It is provided, however, that Seller disclaims any implied warranty of condition, merchantability or fitness for a particular purpose, Said goods being in their present

condition "as is" and "where is."	
Signed the _ 24 + day of _ July 20_18.	
In the presence of: 22 States [Witnes	s]
Stelling Hall	-
Seller	

Seller