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.:			
Gas Gathering System:	Lease Name:			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line feet from E / W Line	SecTwp R E W Legal Description of Lease:			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County:			
Number of Injection Wells **				
Field Name:	Production Zone(s):			
** Side Two Must Be Completed.	Injection Zone(s):			
2000 000 0000				
Surface Pit Permit No.:	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 Drilling			
Pact Operator's License No.	Contact Person:			
Past Operator's License No.	Contact Person:			
Past Operator's Name & Address:	Phone:			
	Date:			
Title:	Signature:			
New Operator's License No.	Contact Person:			
New Operator's Name & Address:	Phone:			
	Oil / Gas Purchaser:			
	Date:			
Title:	Signature:			
Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit # has been			
noted, approved and duly recorded in the records of the Kansas Corporation	n 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: Authorized Signature	Date:			
DISTRICT EPR	PRODUCTION UIC			
DISTRICT EFF	THOUSE HON			

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)
		Circle 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		- ·
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		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
		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.

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)
		Circle FSL/FNL	<i>Circle</i> 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		
			FEL/FWL		
		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 #			
Name:			
Address 1:			
Address 2: State: Zip:+			
Contact Person:	the lease helpw		
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		
Address 2:	county and in the real estate property toy records of the county traceurer		
City: State: Zip:+	_		
the KCC with a plat showing the predicted locations of lease roads, to	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
☐ I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this c, and email address.		
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ess of the surface owner by filling out the top section of this form and he KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handli form and the associated Form C-1, Form CB-1, Form T-1, or Form C	ing fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.		
I hereby certify that the statements made herein are true and correct	t to the best of my knowledge and belief.		
Date: Signature of Operator or Agent:	Title:		



State of Kansas. Montgomery County This instrument was filed for Record on September 5, 2018 8:57 AM Recorded in Book 674 Page 1173-1175



Fee: \$55.00

201802966

Marilyn Calhoun , Register of Deeds

ASSIGNMENT OF OIL & GAS LEASE AND CONSENT TO ASSIGNMENT

COMES NOW, Jones Oil Exploration, LLC, hereafter ASSIGNOR, and in consideration of One Dollar (\$1.00) and other valuable consideration, the receipt of which is hereby acknowledged, does hereby sell, assign, transfer and convey unto Finney Oil Company, P. O. Box 87, Wann, OK 74083, all its right, title and interest in and to the following oil and gas lease:

Lessor:

The Lynell C. Clubine Revocable Trust dated August

31, 1993

Lessee:

Thornton Energy

Date: Recorded:

January 21, 2009 Book 582 at Page 449

Legal Description: S/2 SW/4 of Section 16, Township 34 South, Range 14

East, Montgomery County, Kansas

Including all ASSIGNOR'S oil field equipment, pipes, supplies and personal property located thereon, appurtenant thereto or obtained in connection therewith.

Jones Oil Exploration, LLC

DARRELL MATTHEW JONES.

Managing Member

ACKNOWLEDGMENT

STATE OF KANSAS)
COUNTY OF Chantangua) SS:

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal, the day and year last above written.

A.	REDA TALBOTT
	REDA TALBOTT Notary Public - State of Kansas ot. Expires 2/5/3/
My Ap	ot. Expires 2/5/3/

Reda Sallrott NOTARY PUBLIC

My commission expires: 2/5(2)

CONSENT TO ASSIGNMENT

COMES NOW, **Kevin L. Clubine and Gina L. Clubine**, as successors in interest to the LESSORS under the original Lease, and hereby give their consent to the above and foregoing Assignment subject to the modification to the Oil & Gas Lease made on or about February 20, 2017, requiring a payment to be made to the undersigned.

9-/-/8 Date

 $\frac{9-/-/8}{\text{DATE}}$

KEVIN L. CLUBINE

GINA L. CLUBINE

ACKNOWLEDGMENT

STATE OF KANSAS)
) SS:
COUNTY OF chantongua	
me, the undersigned, a Notary F Kevin L. Clubine and Gina L same persons who executed the acknowledged the execution of t	
	F, I have hereunto set my hand and affixed my seal, the
day and year last above written	
REDA TALBOTT Notary Public - State of Kansas My Appt. Expires 2/5/3/	Reda Sallrott NOTARY PUBLIC

My commission expires: 2/5/2/