KOLAR Document ID: 1519782

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:	ttea 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	SecTwp R EW Legal Description of Lease:			
feet from E / W Line				
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County:			
Number of Injection Wells **	Production Zone(s):			
Field Name:				
** Side Two Must Be Completed.	Injection Zone(s):			
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			
Past Operator's License No.	Contact Person:			
Past Operator's Name & Address:	Phone:			
Table operator o Hamo a Address.				
	Date:			
Title:	Signature:			
New Operator's License No.	Contact Person:			
New Operator's Name & Address:	Phone:			
The special of the second seco				
	Oil / Gas Purchaser:			
	Date:			
Title:	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:				
. neconinencea action.	permitted by No.:			
Data	Data			
Date: Authorized Signature	Date:			
DISTRICT EPR	PRODUCTION UIC			

KOLAR Document ID: 1519782

Side Two

Must Be Filed For All Wells

Lease Name:	KDOR Lease	No.:		_			
(YR DRLD/PRE '67) (i.e. FSL = Feet from South Line) (Oi/Gas/INJ/WSW) (PROD/TA/D/Abandoned) Circle FSL/FNL FEL/FWL	* Lease Name:			_ * Location:			
FSUFNL	Well No.						
FSUFNL FEUFWL						-	
FSUFNL FEUFWL FSUFNL F			FSL/FNL	FEL/FWL		_	
FSUFNL FEUFWL			FSL/FNL	FEL/FWL			
FSUFNL FELIFWL			FSL/FNL	FEL/FWL			
FSL/FNL FEL/FWL			FSL/FNL	FEL/FWL			
FSL/FNL FEL/FWL			FSL/FNL	FEL/FWL			
FSUFNL FEUFWL			FSL/FNL	FEL/FWL			
FSL/FNL FEL/FWL			FSL/FNL	FEL/FWL			
FSL/FNL FEL/FWL			FSL/FNL	FEL/FWL			
FSL/FNL			FSL/FNL	FEL/FWL			
FSL/FNL FEL/FWL			FSL/FNL	FEL/FWL			
FSL/FNL FEL/FWL FSL/FNL FSL/FNL FSL/FNL FSL/FNL FSL/FNL FSL/FWL FSL/FNL FSL/FWL FSL/FWL FSL/FWL FSL/FNL FSL/FWL FSL/			FSL/FNL	FEL/FWL			
			FSL/FNL	FEL/FWL			
			FSL/FNL	FEL/FWL			
FSL/FNL FEL/FWL FEL/FWL FSL/FNL FEL/FWL			FSL/FNL	FEL/FWL			
			FSL/FNL	FEL/FWL			
			FSL/FNL	FEL/FWL			
			FSL/FNL	FEL/FWL			
FSL/FNLFEL/FWL			FSL/FNL	FEL/FWL		_	
			FSL/FNL	FEL/FWL			
FSL/FNL FEL/FWL			FSL/FNL	FEL/FWL			
				FEL/FWL			
			FSL/FNL	FEL/FWL			
FSL/FNLFEL/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.

KOLAR Document ID: 1519782

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 #	Well Location:
Name:	SecTwpS. R East
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: 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:+	
the KCC with a plat showing the predicted locations of lease roads, tank	lic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is or will be lo	ct (House Bill 2032), I have provided the following to the surface 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 ad email address.
KCC will be required to send this information to the surface own	eknowledge 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 CC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 handling to form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	fee with this form. If the fee is not received with this form, the KSONA-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:	Title:

NEVIUS LEASE – ADDITIONAL SURFACE OWNERS

ALL IN SECTION 17, TOWNSHIP 16 SOUTH, RANGE 24 EAST

GARY AND TERESA HANEY 16627 W 255TH ST PAOLA, KS 66071

OKEEFE LIVING TRUST 25720 SOMERSET RD PAOLA, KS 66071

PAUL AND BARBARA MORROW 26190 SOMERSET RD PAOLA, KS 66071 TO: Kansas Corporation Commission

RE: Transfer of Operator on the Nevius Lease - KDOR 122281

This letter is to inform you of a transfer of operations that does not involve a sale of leases.

Mid-Con Drilling is the majority owner of the Nevius Lease and a subsidiary of Viking Energy Group. Viking has created another subsidiary, Petrodome Operating, LLC, to operate its leases in Eastern Kansas.

Petrodome Operating will be taking over operations from S&B Operating on July 1, 2020. Since their related company owns the majority of the Working Interest they don't have any kind of Operating Agreement with themselves, and because no sale took place there's no assignment to show any kind of legal transfer. This letter is intended to serve as evidence that both companies desire and agree to the transfer of operations of the wells.

Jamila Currin Head of Revenue, Land & Regulatory for Petrodo Operating, LLC 713-820-6623	Bradley Kramer Managing Member of S&B Operating, LLC 913-871-3500
A	CKNOWLEDGEMENTS

STATE OF	_)		
COUNTY OF Harris)ss:)		
THIS INSTRUMENT was Revenue, Land & Regulatory for	as acknowledged before me on or Petrodome Operating, LLC, o	this 23 day of June, 2020 by Jamila Currin, In behalf of said company.	lead of
Appointment/Commi	ssion Expires:	VICTOR MOLINA Notary Public, State of Texas Comm. Expires 10-26-2022	Notary Public
STATE OF KANSAS)	Notary ID 128424445	
COUNTY OF JOHNSON)ss:)	g to with more than the first of the market more than the second control of the more than the second than the second control of the	

THIS INSTRUMENT was acknowledged before me on this $\frac{\sum}{}$ day of June, 2020, by Bradley Kramer, Managing Member of S&B Operating, LLC, on behalf of said company.

Appointment/Commission Expires:



Lever Mo