KOLAR Document ID: 1614122

Oil & Gas Conse REQUEST FOR CHA	ATION COMMISSION ERVATION DIVISION ADDIVISION ATION COMMISSION ERVATION DIVISION Form must be Typed Form must be Signed All blanks must be Filled FOR SURFACE PIT PERMIT
	rith the Kansas Surface Owner Notification Act, ted with this form.
Check applicable boxes:	
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.:	Sec Twp R TE \[W
Spot Location:feet from N / S Line	
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County:
Number of Injection Wells**	Production Zone(s):
Field Name:	Injection Zone(s):
** Side Two Must Be Completed.	
Surface Pit Permit No.:	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover Drilling
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:
New Operator's Email:	Date:
Title:	Signature:
	authorization, surface pit permit # has been Commission. This acknowledgment of transfer pertains to Kansas Corporation 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	Authorized Signature
DISTRICT EPR I	PRODUCTION UIC

Side Two

Must Be Filed For All Wells

* Lease Name: _			* Location:		
Well No.	API No. (YR DRLD/PRE '67)	Footage from Sec (i.e. FSL = Feet from		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 _		
		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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	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.

KOLAR Document ID: 1614122

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

Form KSONA-
July 2014
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		
Contact Person:	the lease below:		
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: ______

STATE OF KANSAS } Chautaugua County } ss \$38.00⁴⁷ This instrument was filed for record this <u>1</u> day of <u>Nov</u> <u>2021</u> at <u>10:40</u> o'clock AM and duly recorded in book <u>190</u> of records on page <u>649</u> of records on page _ 649 REGISTER OF DEEDS aur

ASSIGNMENT OF OIL & GAS LEASES

COMES NOW, McMillan, LLC, a Kansas limited liability company, and for valuable

consideration, the receipt of which is hereby acknowledged, hereby warrants, conveys and

assigns 100% of the working interest in the following oil and gas leases to 2R Oil, LLC, a

Kansas limited liability company, 2293 Nation Road, Sedan, Kansas 67361:

,

Sanborn 1 Lease:		
LESSOR:	Donald L. Sanborn and Letha N. Sanborn	
LESSEE:	Walter H. Williams and Robert O. Rogers	
DATE:	April 1, 1979	
RECORDED:	Book 43 Leases Page 607	
LEGAL:	S/2 SE/4 SW/4 and NE/4 SE/4 SW/4 of Section 26,	
	Township 33 South, Range 11 East, Chautauqua County,	
	Kansas	
WORKING		
INTEREST:	.82031200 NRI	

Sanborn 2 Lease:

LESSOR: LESSEE:	Letha N. Sanborn Bobby E. Miller and Bonita C. Miller
DATE:	December 11, 2003
RECORDED:	Book 116 at Page 819
LEGAL:	NW/4 SE/4 SW/4 and beginning at the Northeast corner of
	the SW/4 SW/4, then West 350 feet, South 260 feet, East
	300 feet, North 260 feet to point of beginning, all in Section
	26, Township 33 South, Range 11 East, Chautauqua County,
	Kansas
WORKING	

INTEREST: .87500 NRI

Gardner Lease	•
LESSOR:	Henry Gardner and C. H. Gardner
LESSEE:	James V. Huffman
DATE:	November 9, 2012
RECORDED:	Book D of Leases at Page 61
LEGAL:	N/2 SE/4 and S/2 NE/4 of Section 26, Township 33 South,
	Range 11 East, Chautauqua County, Kansas
WORKING	
INTEREST:	.87500 NRI

Including all pipes, tubing, rods, tank batteries and pumpjacks and equipment located

thereon.

McMILLAN, LLC

DATE

Kathleon M. M. Mullan Kathleen M. McMillan, Managing Member By

STATE OF KANSAS)) SS: COUNTY OF Chartengua

Be It Remembered that on this 29th day of October____, 2021, before me, the undersigned, a Notary Public in and for the County and State aforesaid, came Kathleen M. McMillan, Managing Member of McMillan, LLC, a Kansas limited liability company, who is personally known to me to be the same person who executed the within instrument of writing and such person duly acknowledged the execution of the same.

In Witness Whereof, I have hereunto set my hand and affixed my seal, the day and year last above written.

NOTARY PUBLIC

My commission expires:

CASEY WADE A CASEY WADE Notary Public - State of My Appt. Expires 5.3.2