KOLAR Document ID: 1638835

Direck applicable baces: BUST be submitted with the form. Otheck applicable baces: Filestive Date of Transfer: Gas Gathering System: KS Dept of Rovenue Lease No. Gas Gathering System: KS Dept of Rovenue Lease No. Lease Name:	KANSAS CORPORATION COMMISSION Form T. OIL & GAS CONSERVATION DIVISION Form must be Type REQUEST FOR CHANGE OF OPERATOR All blanks must be Signe TRANSFER OF INJECTION OR SURFACE PIT PERMIT Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,				
Gas Lease: No. of Gas Wells ** Gas Gathering System:		ted with this form.			
Gas Lease: No. of Gas Wells ** Gas Gathering System:	Oil Lease: No. of Oil Wells**	Effective Date of Transfer:			
Gas Gabreing System:		KS Dent of Revenue Lease No			
Structure Disposal Well - Permit No:	Gas Gathering System:				
Spot Location:	Saltwater Disposal Well - Permit No.:				
Entire Project: Yes No Number of Injection Wells ** Field Name: ** ** Side Two Must Be Completed. Production Zone(s): Surface Pit Permit No:					
Entire Project: Yes No Number of Injection Wells ** Field Name: ** ** Side Two Must Be Completed. Production Zone(s): Surface Pit Permit No:	Enhanced Recovery Project Permit No.:				
Number of Injection Wells ** Field Name: ** ** Side Two Must Be Completed. Surface Pil Permit No.:		County:			
Field Name: Injection Zone(s): Surface Pit Permit No::	Number of Injection Wells **				
** Side Two Must Be Completed. Surface Pit Permit No::	Field Name				
Surface Pit Permit No::		Injection Zone(s):			
Past Operator's Name & Address: Phone:		feet from E / W Line of Section			
Past Operator's Name & Address: Phone:					
Date:		Contact Person:			
Title: Signature: New Operator's License No. Contact Person: New Operator's Name & Address: Phone: Oil / Gas Purchaser: Oil / Gas Purchaser: New Operator's Email: Date: Title: Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Image:	Past Operator's Name & Address:	Phone:			
New Operator's License No. Contact Person: New Operator's Name & Address: Phone:		Date:			
New Operator's Name & Address: Phone:	Title:	Signature:			
New Operator's Name & Address: Phone:					
Oil / Gas Purchaser: Oil / Gas Purchaser: New Operator's Email: Date: Title: Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 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 is acknowledged as is acknowledged as the new operator and may continue to inject fluids as authorized by permit the new operator of the above named lease containing the surface pit permit No:	New Operator's License No	Contact Person:			
Oil / Gas Purchaser: Oil / Gas Purchaser: New Operator's Email: Date: Title: Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 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 is acknowledged as is acknowledged as the new operator and may continue to inject fluids as authorized by permit the new operator of the above named lease containing the surface pit permit No:	New Operator's Name & Address:	Phone:			
New Operator's Email:		Oil / Gas Purchaser			
Title: Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit. Image:					
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.		Date:			
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. 	Title:	Signature:			
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action: Date:Authorized Signature Date:Authorized Signature	noted, approved and duly recorded in the records of the Kansas Corporation (Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Permit No.:	is acknowledged as	is acknowledged as			
Permit No.:	the new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface nit			
Authorized Signature Authorized Signature					
Authorized Signature Authorized Signature		Date			
DISTRICT EPR PRODUCTION UIC					
1	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 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		
		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.

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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

Form KSONA-
July 202
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 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 1:			
Address 2:			
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 (see Chapter 55 of the Kansas Statutes Annotated), 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: ______

ASSIGNMENT OF OIL AND GAS LEASE

KNOW ALL MEN BY THESE PRESENTS:

That the undersigned,

Shernoff Enterprises, LLC.

hereinafter called Assignor(s), for and in consideration of One Dollar (\$1.00) the receipt of which is hereby acknowledged, do hereby sell, assign, transfer and set over unto the following named party all of the Assignors' working interest:

HG Holdings, LLC

hereinafter called Assignee, in the following Oil and Gas Lease dated March 23, 2005, executed by Richards Family Partnership, a California Partnership, by a General Partner, (Lessor) to, Jason D. Dinges dba VJI Natural Resources, (Lessee), recorded in Book M106, page 164 & 177, insofar as said lease covers the following described real estate, situated in Pawnee County:

> The Southeast Quarter (SE/4) of Section Three (3), Township Twentythree (23) South, Range Sixteen (16) West of the 6th P.M., Pawnee County, Kansas

together with the rights incident thereto and personal property thereon, appurtenant thereto, or used or obtained in connection therewith.

SUBJECT to overriding royalty interests as appear of record, together with the rights incident thereto and personal property thereon, appurtenant thereto, or used or obtained in connection therewith.

This Assignment is made without any warranty including warranty of title, merchantability or fitness for a particular purpose. The equipment being transferred herein pursuant to the terms of this agreement is transferred in its current condition "WHERE IS AND AS IS".

In connection with this assignment, Assignee agrees that it will properly plug, abandon and clean up the oil and gas lease consistent with the terms of the oil and gas lease and the rules and regulations of the Kansas Corporation Commission at such time as it is required to do so.

This assignment shall be effective as of the 1st day of April, 2022.

EXECUTED, this <u>4 Tuday of openl</u> , 2022.

William Shernoff, Manager Shernoff Enterprises, LLC.

STATE OF CALIFORNIA)) ss: COUNTY OF RINE, CAIDE)

Before me, the undersigned, a Notary Public, within and for said County and State, on this $\underline{4^{\mu}}_{a}$ day of $\underline{A_{\mu}}_{a}$, 2022 personally appeared William Shernoff, Manager of Shernoff Enterprises, LLC. to me personally known to be the identical person(s) who executed the within and foregoing instrument and acknowledged to me that they executed the same as their free and voluntary act and deed for the uses and purposes therein set forth.

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

My commission expires: /0/26/2005

Public

