## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1
April 2019
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:	I				
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 E				
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:					
** 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:				
1 ast Operator 5 Name & Address.					
	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:				
Acknowledgment of Transfer: The above request for transfer of injection	on authorization, surface pit permit # has been				
	n Commission. This acknowledgment of transfer pertains to Kansas Corporation				
Commission records only and does not convey any ownership interest in the					
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:				
Date: Authorized Signature	Authorized Signature				
DISTRICT EPR	PRODUCTION UIC				

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease No.:					
* 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)
		Circle: FSL/FNL	Circle: 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.

<sup>\*</sup> 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

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* 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)
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		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _		

A separate sheet may be attached if necessary.

<sup>\*</sup> 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 2021
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) CE	<b>3-1</b> (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #				
Address 1:				
Address 2:				
City: State: Zip:+				
Contact Person:	the lease below:			
Phone: ( ) Fax: ( )				
Email Address:				
Surface Owner Information:				
Name:				
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:	accepts, and in the real estate property toy records of the accepts traceurer			
City:	_			
the KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated 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 No provided the following to the surface owner(s) of the langer C-1, Form CB-1, Form T-1, or Form CP-1 that I am	otice Act (see Chapter 55 of the Kansas Statutes Annotated), I have d upon which the subject well is or will be located: 1) a copy of the ifiling in connection with this form; 2) if the form being filed is a Form my operator name, address, phone number, fax, and email address.			
the KCC will be required to send this information to the sur	s). I acknowledge that, because I have not provided this information, rface owner(s). To mitigate the additional cost of the KCC performing address of the surface owner by filling out the top section of this form e to the KCC, which is enclosed with this form.			
If choosing the second option, submit payment of the \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form	lling 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	ct to the best of my knowledge and belief.			
Date: Signature of Operator or Agent:	Title:			



Pages Recorded 1

Book: S101 Page: 174

Recording Fee: \$21.00

Date Recorded: 12/5/2022 9:40:09 AM



### ASSIGNMENT OF OIL AND GAS LEASE

### KNOW ALL MEN BY THESE PRESENTS:

That the undersigned ROBERT CHRIESTENSON, herein referred to as Assignor, for and in consideration of TEN DOLLARS (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, does hereby sell, assign, transfer and set over unto CHRIESTENSON OIL LLC, Hereinafter referred to as Assignee, all of the 7/8 working interest, representing .875 of the net revenue Interest in and to the oil and gas lease Dated January 31, 1979 from Glay E Yoho and Rosalie Yoho, husband and wife, to Charley and Juanita Chriestenson, husband and wife, lessee recorded in book 48, page 555 insofar as said lease covers the following described land in Woodson County. State of Kansas

WEST HALF OF THE SOUTHWEST QUARTER (W ½ SW1/4) AND SOUTH HALF OF THE NORTHWEST QUARTER (S1/2 NW1/4) AND SOUTHWEST QUARTER OF THE NORTHEAST QUARTER (SW1/4 NE1/4) AND NORTHWEST QUARTER OF THE SOUTHEAST QUARTER (NW1/4 SE1/4) OF SECTION 26, TOWNSHIP 23, RANGE 16.

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

And for the same consideration, the Assignor covenants with the Assignee, their successors or assigns, that the assignor is the lawful owner of the interest above interest above signed, in and to said leases, estates, right and property.

The Assignor acknowledges that the above-described lease are valid and subsisting lease on said real estate and remain enforceable in all respects.

DATED THIS 151 day of December, 2022

Robert Chriestenson, owner

STATE OF KANSAS, COUNTY OF WOODSON, ss:

BE IT REMEMBERED, that on this / sr day of December, 2022, before me, the undersigned, a Notary Public in and for said county and state, came Robert Chriestenson to me personally known to be the same person who executed the foregoing instrument, and said person who executed the foregoing instrument, and said person duly acknowledged the execution of the same.

IN WINESS WEREOF. I have hereunto set my hand affixed my official seal the day and year Last above written.

strice of Sahuster Notary Public, Patricia J. Schuster

PATRICIA J. SCHUSTER My Appointment Expires December 31, 2025

My appointment Expires: Accorded 31, 2025