KOLAR Document ID: 1767896

KANSAS CORPORATION COMMISSION Form T- OIL & GAS CONSERVATION DIVISION Form must be Type REQUEST FOR CHANGE OF OPERATOR Form must be Signe All blanks must be Fille Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,				
Check applicable boxes: MUST be submit	ted 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:				
Saltwater Disposal Well - Permit No.:	Lease Name:			
Spot Location:	SecTwp R EW 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):			
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling Past Operator's License No. Past Operator's Name & Address: Title: New Operator's License No. New Operator's Name & Address: New Operator's Name & Address: New Operator's Email: Title:				
	g			
	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 F	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.

KOLAR Document ID: 1767896

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 INTERESTS

KNOW ALL MEN BY THESE PRESENTS:

record, the following described oil and gas leases and agreements, to-wit: tenants Shawn D. Evans and Sara J. Evans, as joint tenants with right of survivorship and not as sufficiency of which is hereby acknowledged, does hereby sell, assign, transfer and set over unto and in consideration of One in common, hereinafter called "Assignee," subject to overriding royalty interests of That the undersigned, John O. Farmer, Inc., Dollar (\$1.00) and other valuable hereinafter called "Assignor," consideration, the receipt and for:

Bender Lease

following described lands to-wit: County, Kansas, insofar and only insofar as said lease covers the Book 75 at page 624 in the office of the register of deeds of Russell husband, lessors, to Eugene O. Huebner, lessee, <u>10</u> A 12.50% working interest in an oil and gas lease dated September 1951, from Theresa D. Bender and Henry H. Bender, and recorded in her

The Northeast Quarter of the Southeast Quarter of the Southwest Quarter (NE/4 SE/4 SW/4) and the South Half of the Southeast Quarter of the Southwest Quarter (S/2 SE/4 NW/4) of Section Six (6), Township Fifteen (15) South, Range Thirteen (13) West of the 6th P.M., Russell County, Kansas;

situated on, or used in connection with the leases. agreements, unitization and pooling agreements, and similar rights and interests pertaining to, easements, used or obtained in connection therewith, including, but not limited to, a like interest in all together with the rights incident thereto and the personal property thereon, appurtenant thereto, or rights of way, injection and disposal agreements and rights, common tank battery

that said interest is free and clear of all liens, encumbrances or adverse claims Assignor warrants that Assignor is the owner of the interest hereby conveyed and

EXECUTED this This assignment shall be effective as of the 1st day of April, 2024, at 7:00 A.M 28th day of May 2024

NHOF John/ ,O 0 FARMER, INC Farmer IV, President

ACKNOWLEDGMENT

ż

STATE OF KANSAS, COUNTY OF RUSSELL: This instrument was acknowledged before me on _ President of John O. Farmer, Inc. May 25th, 2024, by John O. Farmer IV,

My Appt. Exp. 5/23 20 22 NOTARY PUBLIC - States of Kansas TRISHA K. VON LINTEL

.

Notary Public (Printed Name) TriSher, K. Van Lin 4-c/ My appointment expires: 5/23/27

.