

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:

- Oil Lease: No. of Oil Wells _____ **
- Gas Lease: No. of Gas Wells _____ **
- Gas Gathering System: _____
- Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from N / S Line
_____ feet from E / W Line
- Enhanced Recovery Project Permit No.: _____
Entire Project: Yes No
Number of Injection Wells _____ **

Field Name: _____

**** Side Two Must Be Completed.**

Effective Date of Transfer: _____

KS Dept of Revenue Lease No.: _____

Lease Name: _____

____ - ____ - ____ - ____ Sec. ____ Twp. ____ R. E W

Legal Description of Lease: _____

County: _____

Production Zone(s): _____

Injection Zone(s): _____

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

_____ feet from N / S Line of Section

_____ 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: _____

Title: _____

Signature: _____

New Operator's License No. _____

Contact Person: _____

New Operator's Name & Address: _____

Phone: _____

New Operator's Email: _____

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
the new operator and may continue to inject fluids as authorized by

Permit No.: _____. Recommended action: _____

Date: _____

Authorized Signature

_____ is acknowledged as
the new operator of the above named lease containing the surface pit

permitted by No.: _____.

Date: _____

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 Section Line (i.e. FSL = Feet from South Line)	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	_____

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.

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) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____ Fax: (_____) _____

Email Address: _____

Well Location:

____ - ____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ East West

County: _____

Lease Name: _____ Well #: _____

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

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.

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: _____ Title: _____

2024-0398

DATE RECORDED: 03/26/2024 02:28:03 PM

RECORDING FEE 30.00

TECHNOLOGY FEE 6.00

HERITAGE TRUST FEE 2.00

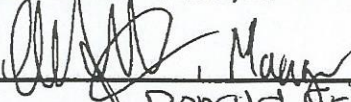
ASSIGNMENT OF OIL AND GAS LEASE

That the Undersigned MF Wells, LLC called Assignor, for in consideration of One Dollar (\$1.00) and other goods and valuable consideration, the receipt where of is hereby acknowledged, does hereby sell, assign, transfers and set over unto McFadden Oil Company. P.O. Box 394, Iola, Kansas 66749 hereinafter called Assignee the Working Interest of .84875000 in the lease per Exhibit A recorded in the office of the Register of Deeds Allen County Kansas

PER EXHIBIT "A"

This assignment is made by the Assignor without covenants or warranty of title, either expressed or implied, but is made with full substitution and subrogation of Assignee in and to all covenants and warranties by others heretofore given or made in respect to the interest assigned here under.

Executed this March 1, 2024



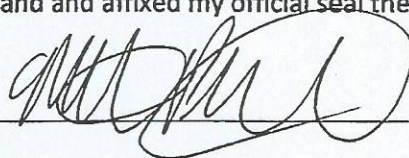
Donald Friend II
MF Wells, LLC

STATE OF Kansas, COUNTY OF Johnson

SS _____

Before me, the undersigned, a Notary Public, within and for said County and State, on the 1st day of March, 2024, personally appeared Donald Friend II to me personally known to be the identical person who executed the foregoing instrument, and acknowledged to me that he executed the same as his free and voluntary act and deed for the uses and purposes therein set forth.

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



Notary

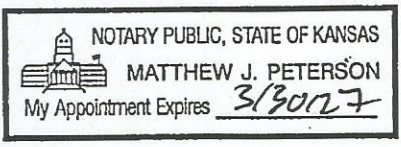


EXHIBIT "A"

MEIWES LEASE:

The Northwest Quarter of the Northeast Quarter (NW/4 NE/4) in Section Eight (8), Township Twenty-four (24) South, Range Nineteen (19) East, Allen County, Kansas

TRESTER LEASE:

The Northeast Quarter of the Northwest Quarter (NE/4 NW/4) and a strip 2 rods wide across the entire North end of the Southeast Quarter of the Northwest Quarter (SE/4 NW/4) in Section Eight (8), Township Twenty-four (24) South, Range Nineteen (19) East of the Sixth Principal Meridian; LESS starting at the Northwest corner of the Northeast Quarter of the Northwest Quarter thence 416 feet East, thence South 520 feet, thence West 416 feet, thence North 520 feet to the point of beginning all in Section Eight (8), Township Twenty-four (24) South, Range Nineteen (19) East, Allen County, Kansas

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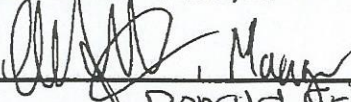
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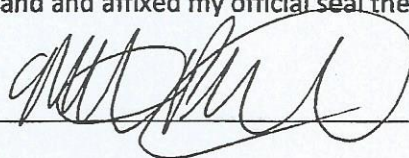
Donald Friend II
MF Wells, LLC

STATE OF Kansas, COUNTY OF Johnson

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Notary

