KOLAR Document ID: 1798723

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: | mitted 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: | Lease Name: | | | |
| Saltwater Disposal Well - Permit No.: | | | | |
| Spot Location:feet from N / S Line | SecTwpREV | | | |
| feet from DE / W Line | Legal Description of Lease: | | | |
| Enhanced Recovery Project Permit No.: | - | | | |
| Entire Project: Yes No | County: Production Zone(s): | | | |
| Number of Injection Wells** | | | | |
| 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: | | | | |
| i asi Operator s Marrie & Address. | | | | |
| | _ Date: | | | |
| Title: | _ Signature: | | | |
| New Operator's License No. | Contact Person: | | | |
| New Operator's Name & Address: | Phone: | | | |
| | Oil / Gas Purchaser: | | | |
| New Operator's Email: | | | | |
| Title: | _ Signature: | | | |
| Acknowledgment of Transfer: The above request for transfer of inject noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the conveying transfer of the conveyin | on Commission. This acknowledgment of transfer pertains to Kansas Corporation | | | |
| is acknowledged as | s 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 | | | |
| DISTRICT EPR | PRODUCTION UIC | | | |
| DIGITAL LITE | | | | |

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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) | |
| | | <i>Circle:</i> 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 | | | |
| | | | 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

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 # | Well Location: | | |
| Address 1: | County: | | |
| Address 2: | Lease Name: Well #: | | |
| City: | 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:++ | | | |
| the KCC with a plat showing the predicted locations of lease roads, tan are preliminary non-binding estimates. The locations may be entered of | odic Protection Borehole Intent), you must supply the surface owners and hk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. | | |
| provided the following to the surface owner(s) of the land up Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filling C-1 or Form CB-1, the plat(s) required by this form; and 3) my I have not provided this information to the surface owner(s). The KCC will be required to send this information to the surface. | e Act (see Chapter 55 of the Kansas Statutes Annotated), I have upon which the subject well is or will be located: 1) a copy of the ng in connection with this form; 2) if the form being filed is a Form of operator name, address, phone number, fax, and email address. I acknowledge that, because I have not provided this information, becomer(s). To mitigate the additional cost of the KCC performing lidress 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 If choosing the second option, submit payment of the \$30.00 handling | the KCC, which is enclosed 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 I hereby certify that the statements made herein are true and correct to | | | |
| Date: Signature of Operator or Agent: | T-11. | | |



620-793-3051

October 15, 2024

Kansas Corporation Commission 266 N Main St., Suite 220 Wichita, KS 67202

RE: T-1

This is to inform the KCC of the Transfer of Operator from L D Drilling, Inc. (6039) to MAD Operators LLC (36164).

Very Truly Yours,

Lanny Butner Mark Davis Rashell Patten Kim Shoemaker

MAD OPERATORS LLC

7 SW 26 Ave. Great Bend, KS 67530

620-793-3051

November 1, 2024

Kansas Corporation Commission 266 N Main St., Suite 220 Wichita, KS 67202

RE: T-1

This is to inform the KCC of the change of name from L D Drilling, Inc. (6039) to MAD Operators LLC (36164).

Very Truly Yours,

Lanny Butner
Mark Davis
Kim Shoemaker
Rashell Patten: Managing Member: