KOLAR Document ID: 1837933

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:	inteed 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	SecTwpREW				
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:	Injection Zone(s):				
** Side Two Must Be Completed.					
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:				
r dot operator o realite di redicoso.					
	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				
noted, approved and duly recorded in the records of the Kansas Corporatio	n Commission. This acknowledgment of transfer pertains to Kansas Corporation				
Commission records only and does not convey any ownership interest in th	e 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:					
. Recommended action.	permitted by No.:				
Date:	Date:				
Authorized Signature	Authorized Signature				
DISTRICT EPR	PRODUCTION UIC				

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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 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	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
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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) C	CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #				
Name:				
Address 1:	•			
Address 2:				
City:	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			
Address 1:	sheet listing all of the information to the left for each surface owner. Surface			
Address 2:	and the second in the second extents assessment the second of the second three seconds.			
City: State: Zip:+				
	s, tank batteries, pipelines, and electrical lines. The locations shown on the plat red 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 N provided the following to the surface owner(s) of the lar Form C-1, Form CB-1, Form T-1, or Form CP-1 that I are	lotice Act (see Chapter 55 of the Kansas Statutes Annotated), I have nd upon which the subject well is or will be located: 1) a copy of the m filing in connection with this form; 2) if the form being filed is a Form by my operator name, address, phone number, fax, and email address.			
the KCC will be required to send this information to the si	r(s). I acknowledge that, because I have not provided this information, urface owner(s). To mitigate the additional cost of the KCC performing d address of the surface owner by filling out the top section of this form ble to the KCC, which is enclosed with this form.			
If choosing the second option, submit payment of the \$30.00 han form and the associated Form C-1, Form CB-1, Form T-1, or Form	ndling fee with this form. If the fee is not received with this form, the KSONA-1 in CP-1 will be returned.			
I hereby certify that the statements made herein are true and corre	ect to the best of my knowledge and belief.			
Date: Signature of Operator or Agent:	Title:			

Robert John Simminger JR

4037 Road 25, Ludell, KS. 67744

Robert John Simminger JR is transferring operations of the following leases listed to Road 27 LLC, effective March 15, 2025.

LEASE	WELL NAME	API	LEGAL	COUNTY
Simminger SW	Simminger SW 1	15-153-21005-0000	SW, 17-1s-32w	Rawlins
Simminger SW	Simminger SW 2	15-153-21059-0000	SW, 17-1s-32w	Rawlins
Simminger SW	Simminger SW 3	15-153-21060-0000	SW, 17-1s-32w	Rawlins
Simminger SW	Simminger SW 5	15-153-21155-0002	SW, 18-1s-32w	Rawlins
Wilhelm Unit	Wicke 3	15-153-05258-0002	NE, 20-1s-32w	Rawlins
Wilhelm Unit	Wicke 10	15-153-20006-0002	SE, 20-1s-32w	Rawlins
Wilhelm Unit	Wicke 22	15-153-20526-0000	SE, 20-1s-32w	Rawlins
Wilhelm Unit	Wicke 23	15-153-20527-0000	NE, 20-1s-32w	Rawlins
Wilhelm Unit	Meyer 8	15-153-05212-0000	SW, 20-1s-32w	Rawlins
Wilhelm Unit	Meyer 15	15-153-20200-0001	NW, 20-1s-32w	Rawlins
Wilhelm Unit	Kruse 20	15-153-20249-0000	NW, 21-1s-32w	Rawlins
1 10 10 10 10 10 10 10 10 10 10 10 10 10				

Respect John Simminger JR (Owner)

Robert John Simminger Jr.

Neil Hutton (Managing Member)

Printed Name