## Kansas Corporation Commission Oil & Gas Conservation Division

Form must be Typed Form must be Signed All blanks must be Filled

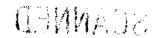
### REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,

Check Applicable Boxes:	MUST be submitted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 7/15/2010
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 231826
Gas Gathering System:	NA CO
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N /	
feet from E /	
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Labette
Number of Injection Wells **	Production Zone(s): Summit, Excello, Riverton
Field Name: MOUND VALLEY	보 보
** 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 Ha	eul)  feet from E / W Line of Section
Type of Pit: Emergency Burn	Settling Haul-Off Workover Drilling
Past Operator's License No33583 ✓	Contact Person: Steven Tedesco
Past Operator's Name & Address: Admiral Bay (US	A) Inc. Phone: 303-350-1255
7060 B. South Tucson Way, Centennial,	CO 80112 Date: 7/26/10/1
Title: President & CEO	Signature: Alsh
New Operator's License No. 34420 √	Contact Person: Brent Nattrass
New Operator's Name & Address: Exodus Gas & Oil, I	
1701 Walnut, 4th Floor	Oil / Gas Purchaser: Seminole Energy Services RECEIVED
Kansas City, MO 64108	Date: 7/23/10 AUG 2 3 2010
Title: VP Operations	MR 1874
	Signature: 7 (B) WW KCC WICHITA
Acknowledgment of Transfer: The above request for tr	
	ansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any owners	ship interest in the above injection well(s) or pit permit.
is a	cknowledged as is acknowledged as
the new operator and may continue to inject fluids as	s authorized by the new operator of the above named lease containing the surface pit
Permit No.: Recommended action:	permitted by No.:
Date:	
Authorized Signature	Authorized Signature
DISTRICT EPR ///2.2	PRODUCTION 11-24-10 UIC 11-23-10
Mail to: Past Operator	New Operator District

#### Side Two

#### Must Be Filed For All Wells

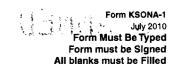


* Lease Name:	FROEBE (32)		* Location:S	sec 32 all, T32S R19	<u>E</u>
Well No. API No. (YR DRLD/PRE '67)			Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)
14-32	15-099-23733 <i>-</i> 00-	7 4646 FSLEN	3289 FED FWL	gas	producing
		FSL/FNL	FEL/FWL		
<del></del>		FSL/FNL	FEL/FWL		
	<u> </u>	FSL/FNL	FEL/FWL		
		F\$L/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	***************************************	
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
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		- I SUFINE	LL/FVVL		KCC WICHIT

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



# 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 (C	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 34420	Mall Location		
OPERATOR: License # 34420  Name: Exodus Gas & Oil, LLC  Address 1: 1701 Walnut, 4th Floor  Address 2:	Well Location:Sec. 32 Twp. 33 S. R. 18 ▼ East West		
Address 1: 1701 Walnut, 4th Floor	County: Labette		
Address 2:	Lease Name: Froebe Well #: 14-32		
City: Kansas City State: MO Zin: 64108	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: Brent Nattrass	the lease below:		
Contact Person: Brent Nattrass  Phone: ( 816 ) 222-7500 Fax: ( 816 ) 222-7501	sec 32 all, T32S R19E		
Email Address:			
	<del></del>		
Surface Owner Information:  Name: Kenneth W. and Shirley A. Froebe  Address 1: 1569 Jackson Rd	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		
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: Mound Valley State: KS Zip: 67354 +			
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and a batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
Select one of the following.			
	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this		
	cknowledge that, because I have not provided this information, the rer(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	fee with this form. If the fee is not received with this form, the KSONA-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: 7/23/10 Signature of Operator or Agent:	Title: VP Operations		
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AUG 2 3 2010

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