# 071510\_Isle\_Charles.pdf

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1
March-2010
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.

Self-Bettive Date of Transfer: 7/15/2010

Check Applicable Boxes:

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.: 225889		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:	Lease Name: ISLE (CHARLES) /		
Spot Location: feet from N / S Line	<u>se - nw - sw - se Sec. 36 Twp. 26 R. 17</u>		
feet from E / W Line	Legal Description of Lease: s/2 se/4 sec 36 T26S R17E		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Allen		
Number of Injection Wells**			
Field Name: HUMBOLDT-CHANUTE	Production Zone(s): Riverton		
** 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 Haul)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling OF		
Past Operator's License No. 33583	Contact Person: Steven Tedesco		
Past Operator's Name & Address: Admiral Bay (USA) Inc.	Phone: 303-350-1255		
7060 B. South Tucson Way, Centennial, CO 80112	Date: 7/2(0/10/10		
Title: President & CEO	hall of		
nue.	Signature:		
New Operator's License No. 34420	Contact Person: Brent Nattrass		
New Operator's Name & Address: Exodus Gas & Oil, LLC	Phone: 816-222-7500		
1701 Walnut, 4th Floor	DECEMEN		
	Oil / Gas Fulchaser		
Kansas City, MO 64108	Date: 7/23/10		
Title: VP Operations	Signature:		
	KCC WICHI		
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been		
	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the a			
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:	·		
, Neconinended action:	permitted by No.:		
Date:	Date		
Authorized Signature	Date:		
DISTRICT EPR _/1/,7//DP	PRODUCTION 11-30-10 UIC 11-17-10		
Mail to: Past Operator New Operator			





#### Must Be Filed For All Wells

	9 No.: 225889 ISLE (CHARLES)		* Location:S	s/2 se/4 sec 36 T265	S R17
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)	ll Well Status
15-36	15-001-29423 /	830 Circle	2020 FE)/FWL	gas	producing
		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		
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		FSL/FNL			
					ECEIVED
		FSL/FNL		A	UG <del>2 3 2010</del>
separate she	et may be attached if necessary	FSL/FNL	FEL/FWL	KC	C WICHITA

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 K60NA-1
July 2010
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) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 34420	Walland		
Name: Exodus Gas & Oil. LLC	Well Location:  Se_nw_sw_se_Sec. 36 Twp. 26 s. R. 17 ★ East West		
Name: Exodus Gas & Oil, LLC Address 1: 1701 Walnut, 4th Floor	County Allen		
Address 2:	County: Allen  Lease Name: ISLE (CHARLES) Well #: 15-36		
City: Kansas City State: MO Zip: 64108 +	Lease Name		
Contact Parson. Brent Nattrass	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person: Brent Nattrass Phone: ( 816 ) 222-7500 Fax: ( 816 ) 222-7501			
Email Address:			
Surface Owner Information:  Name: Charles E. and Rebecca F. Isle  Address 1: 578 Alabama Rd	When filing a Form T-1 involving multiple surface owners, attach an additiona 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.		
the KCC with a plat showing the predicted locations of lease roads, tar	odic Protection Borehole Intent), you must supply the surface owners and nk 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.		
Select one of the following:			
owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a			
☐ I have not provided this information to the surface owner(s). It is KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling.	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this g 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	g fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.		
I hereby certify that the statements made herein are true and correct to	o the best of my knowledge and belief.		
Date: 7/23/10 Signature of Operator or Agent: MK	Title: VP Operations		

RECEIVED AUG 2 3 2010