KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

AUG 26, 2010

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Form T-1 March 2010

CC WICHITA Form must be Typed
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 submit	tted 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.: 223819 / M
Gas Gathering System:	Lease Name: JAYNES
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	Sec. <u>8,9,16</u> Twp. <u>30</u> R. <u>17</u> VE W
feet from E / W Line	Legal Description of Lease: _sw/4 and nw/4 of se/4 sec 9, nw/4 of
Enhanced Recovery Project Permit No.:	sec 16, all in 30S R17E
Entire Project: Yes No	County: Wilson
Number of Injection Wells**	Production Zone(s):Summit, Excello, Bevier, Croweburg, Fleming, Mineral, Rowe, Neutral
Field Name: THAYER	
** 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)	
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
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 20 106/
Title: President & CEO	
THE.	Signature: ATO Medical Signature:
New Operator's License No	Contact Person: Brent Nattrass
New Operator's Name & Address: Exodus Gas & Oil, LLC	Phone: 816-222-7500
1701 Walnut, 4th Floor	
	Oil / Gas Purchaser: Seminole Energy Services
Kansas City, MO 64108	Date: 7/23/10
Title: VP Operations	Signature: MS Val
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:	
. Hodomineraed action,	permitted by No.:
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR /1/23/10 P	RODUCTION 1 - 29-10 UIC 1(-23-10
Mail to: Past Operator New Operator	· · · V

Must Be Filed For All Wells

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KDOR Lease	e No.: 223819		····		KCC WICHITA
* Lease Name	JAYNES		* Location:s	sw/4 and nw/4 of se/4 sec 9, r	nw/4 of sec 16, all in 30S R17E
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)
16-2	<u>15-205-25341 ✓</u>	4680 Circle 4930 FSL FNL	rrected In 3540 FEDFWL	tent 11/28/01 gas	producing
16-3	<u>15-205-26034</u>	4650 FSL NL	4880 FEDFWL	gas	producing
9-1	15-205-25340 ^{-/}	350 FSUFNL	2990 FEL FWL	gas	producing
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
7.70		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		The state of the s
		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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Form KSONA-1

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

KCC WICHITAForm 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 Name: Exodus Gas & Oil, LLC Address 1: 1701 Walnut, 4th Floor	Well Location:		
Name: Exodus Gas & Oll, LLC			
Address 1: 1701 Walnut, 4th Floor	County: Wilson		
Address 2:	Lease Name: Jaynes Well #:		
City: Kansas City State: MO Zip: 64108 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: Brent Nattrass Phone: (816) 222-7500 Fax: (816) 222-7501	the lease below:		
Phone: (816) 222-7500 Fax: (816) 222-7501	sw/4 and nw/4 of se/4 sec 9, nw/4 of sec 16, all in 30S R17E		
Email Address:	III 303 KI7E		
Surface Owner Information: Name: Blakeslee D. Jaynes Address 1: 23162 500 Road Address 2:	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.		
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.		
owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface located: 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 and email address.		
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:	Title: VP Operations		