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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.

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.: 223650,227599
Gas Gathering System:	
Saltwater Disposal Well - Permit No.: D27769	Lease Name: MITCHELL B
Spot Location: 3729 feet from N / ✓ S Line	Sec14 Twp30 R17 _/ EW
2070 feet from ✓ E / ☐ W Line	Legal Description of Lease: se/4 and e/2 of sw/4, ne/4, e/2 of nw/4,
Enhanced Recovery Project Permit No.:	e/2 of se/4, all in sec 14, s/2 sec12, n/2 sec 13, all in T30S R17E
Entire Project: Yes No	County: Neosho
Number of Injection Wells **	
Field Name: THAYER (South)	Application
** Side Two Must Be Completed.	Injection Zone(s): ARBUCKLE
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	feet fromE /W Line of Section Haul-OffWorkoverDrilling
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: 7/7/4/10 // 0
Title: President & CEO	0011
	Signature:
New Operator's License No. 34420	Contact Person: Brent Nattrass
New Operator's Name & Address: Exodus Gas & Oil, LLC	Phone: 816-222-7500 RECEVED
1701 Walnut, 4th Floor	Oil / Gas Purchaser: Seminole Energy Services AUG 3 0 2010
Kansas City, MO 64108	
Title: VP Operations	Date: 7/23/10 KCC WICHIT
Title: VI Operations	Signature:
Acknowledgment of Transfer: The above request for transfer of injection a	
noted, approved and duly recorded in the records of the Kansas Corporation (Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the a	above injection well(s) or pit permit.
Exadus Gras + Oil, LLC 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.: D-27,719 . Recommended action:	permitted by No.:
Violation use 2009	portunitod by 140
Date: 11-23-10 Change & South	Date:
Authorized Signature,	Authorized Signature
DISTRICT PR _///22/10 P	PRODUCTION 11-24-10 UIC 11-23-10
Mail to: Past Operator (-23-10) New Operator	

Must Be Filed For All Wells

223650,227599 KDOR Lease No.: MITCHELL B * Lease Name: se/4 and e/2 of sw/4, ne/4, e/2 of nw/4,e/2 of se/4, all in sec 14, s/2 sec12, n/2 sec 13, all in T30S R17E * Location: Well No. API No. Footage from Section Line Type of Well Well Status (YR DRLD/PRE '67) (i.e. FSL = Feet from South Line) (Oil/Gas/INJ/WSW) (PROD/TA'D/Abandoned) 3885 FSL)FNL 14-10 **15-133-25614** / 849 gas producing 14-7 15-13<u>3-25611</u> 3710 (FSI) FNL 2300 FED/FWL gas producing 14-11 15-133-26523 [/] 660 gas producing 15-133-26524 🗸 1980 gas <u>producing</u> FSL/FNL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL . FEL/FWL FSL/FNL FEL/FWL ESI /ENI FEL/FWL FSL/FNL FEL/FWL RECEIVED FSL/FNL FEL/FWL AUG 3 0 2010 FSL/FNL 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.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-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.

OPERATOR: License # 34420	_ Well Location:
Name: Exodus Gas & Oil, LLC	w/2_nw Sec. 14 Twn 30 S R 17 V Fast West
Address 1: 1701 Walnut, 4th Floor	
Address 2:	Lacco Nama Mitchall B
City: Kansas City State: MO Zip: 64108 +	
Contact Person: 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: John T. and Michael S. Mitchell Address 1: See attached list	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
Address 2:	owner information can be found in the records of the register of deeds for the
City: State: Zip:+	, , , , , , , , , , , , , , , , , , , ,
are preliminary non-binding estimates. The locations may be entered	nodic 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: I certify that, pursuant to the Kansas Surface Owner Notice 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, I have not provided this information to the surface owner(s).	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, the plat(s) required by this and email address.
Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice 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, I have not provided this information to the surface owner(s).	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the warr's). To mitigate the additional cost of the I/OO and the plat(s).
Are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice 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, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface o task, I acknowledge that I am being charged a \$30.00 handlin	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form CB-1, Form CB-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. acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this gifee, payable to the KCC, which is enclosed with this form.
Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice 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, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface o task, I acknowledge that I am being charged a \$30.00 handling the choosing the second option, submit payment of the \$30.00 handling.	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 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. acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this gree, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.

RECEIVED AUG 3 0 2010 John T. Mitchell 5481 Yale Road Thayer, KS 66776

Michael S. Mitchell, Trustee P.O. Box 753 Chanute, KS 66720

> RECEIVED AUG 3 0 2010 KCC WICHITA