

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**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.

Form T-1

March 2010

Form must be Typed

Form must be Signed

All blanks must be Filled

Check Applicable Boxes:

Oil Lease: No. of Oil Wells \_\_\_\_\_ \*\*

Gas Lease: No. of Gas Wells 4 \*\*

Gas Gathering System: \_\_\_\_\_

Saltwater Disposal Well - Permit No.: \_\_\_\_\_

Spot Location: \_\_\_\_\_ feet from  N /  S Line  
\_\_\_\_\_ feet from  E /  W Line

Enhanced Recovery Project Permit No.: \_\_\_\_\_

Entire Project:  Yes  No

Number of Injection Wells \_\_\_\_\_ \*\*

Field Name: HUMBOLDT-CHANUTE

**\*\* Side Two Must Be Completed.**

Surface Pit Permit No.: \_\_\_\_\_  
(API No. if Drill Pit, WO or Haul)

Type of Pit:  Emergency  Burn  Settling

Effective Date of Transfer: 7/15/2010

KS Dept of Revenue Lease No.: 231860 ✓ KGR4231861 ✓ KGR

Lease Name: SMITH 34 (ROBERT)

Sec. 34 Twp. 26 R. 17  E  W

Legal Description of Lease: ne/4 and e/2 sw/4 sec 34 T26S R17E

County: Woodson

Production Zone(s): Squirrel, Riverton

Injection Zone(s): \_\_\_\_\_

feet from  N /  S Line of Section

feet from  E /  W Line of Section

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: 7/26/10 ✓ J.H. Ted

Title: President & CEO

Signature: J.H. Ted

New Operator's License No. 34420✓

Contact Person: Brent Nattrass

New Operator's Name & Address: Exodus Gas & Oil, LLC

Phone: 816-222-7500

**RECEIVED**

1701 Walnut, 4th Floor

Oil / Gas Purchaser: Seminole Energy Services

**AUG 23 2010**

Kansas City, MO 64108

Date: 7/23/10 ✓ MB Natts

Title: VP Operations

Signature: MB Natts

**KCC WICHITA**

**Acknowledgment of Transfer:** The above request for transfer of injection authorization, surface pit permit # \_\_\_\_\_ has been 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 above injection well(s) or pit permit.

\_\_\_\_\_ is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: \_\_\_\_\_ . Recommended action: \_\_\_\_\_

\_\_\_\_\_ is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.: \_\_\_\_\_ .

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Authorized Signature

Authorized Signature

DISTRICT \_\_\_\_\_ EPR 11/17/10 PRODUCTION 11-30-10 UIC 11-17-10  
Mail to: Past Operator \_\_\_\_\_ New Operator \_\_\_\_\_ District \_\_\_\_\_

***Must Be Filed For All Wells***

KDOR Lease No.: 231860 + 231861

\* Lease Name: SMITH 34 (ROBERT)

\* Location: ne/4 and e/2 sw/4 sec 34 T26S R17E

*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

**CERTIFICATION OF COMPLIANCE WITH THE  
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1

July 2010

Form Must Be Typed

Form must be Signed

All blanks must be Filled

*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)  T-1 (Transfer)  CP-1 (Plugging Application)

OPERATOR: License # 34420  
Name: Exodus Gas & Oil, LLC  
Address 1: 1701 Walnut, 4th Floor  
Address 2: \_\_\_\_\_  
City: Kansas City State: MO Zip: 64108 + \_\_\_\_\_  
Contact Person: Brent Nattrass  
Phone: ( 816 ) 222-7500 Fax: ( 816 ) 222-7501  
Email Address: \_\_\_\_\_

Well Location: \_\_\_\_\_ Sec. 34 Twp. 26 S. R. 17  East  West  
County: Woodson  
Lease Name: SMITH 34 (ROBERT) Well #: \_\_\_\_\_  
*If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:*  
ne/4 and e/2 sw/4 sec 34 T26S R17E

**Surface Owner Information:**

Name: Robert Smith  
Address 1: 166 Yarrow Rd  
Address 2: \_\_\_\_\_  
City: Chanute State: KS Zip: 66720 + \_\_\_\_\_

*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.*

*If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered 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 Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

*If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.*

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AUG 23 2010

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: MR. H.

Title: VP Operations

KCC WICHITA