## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 1-1
July 2014
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 submit	itted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 1/1/2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 1036125219 225 489
Gas Gathering System:	Lease Name: FEWINS 9
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease: NE COR, S, W TO W/4, E
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Allen
Number of Injection Wells**	Production Zone(s): CHEROKEE COALS
Field Name: CHEROKEE BASIN COAL AREA	Injection Zone(s):
** Side Two Must Be Completed.	injection zone(s)
NA NA	
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover OR Drilling
Past Operator's License No.	Contact Person:Brian Lingard
Past Operator's Name & Address: Exodus Gas & Oil LLC	Phone: 281-822-3939
1001 McKinney St. Ste. 804 Houston, TX 77002	5/5/2016 Date:
Title: Managing Partner	00000
Title.	Signature:
New Operator's License No. 35018 /	Contact Person: Raymond L. Gilbert
Entranção Engray II.C	
New Operator's Name & Address: Entransco Energy LLC P.O. Box 578 Dewey, OK 74029	NA - CIVICHILL
	Oil / Gas Purchaser: VA
	Date: 5/5/2016 HIN 10 2016
Title: Field Operations Manager	Signature: RECEIVED
Acknowledgment of Transfer: The above request for transfer of injection a	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 a	above injection well(s) or pit permit.
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:	permitted by No.:
Date:	Date:
Authorized Signature	Authorized Signature
	PRODUCTION 7-12-10 JIG 12 2010
Mail to: Past Operator New Operato	rDistrict

#### Must Be Filed For All Wells

KDOR Lease No.: 225484	<del>103612521</del> 9

Lease Name: _	FEWINS	5 9	* Location:	NE COR, S,	W TO W/4, E
Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet from	ection Line m South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
9-D2	15-001-29531	CircleFSL(FNL)	990 Gircle FEIVFWL	GAS	PROD
		FSL/FNL	FEL/FWL		
	40,12	FSL/FNL	FEL/FWL		-
<del></del>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL _	FEL/FWL		
		FSL/FNL .	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	A A A A A A A A A A A A A A A A A A A	7-14-7-1-1-1
		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			K L L V
		FSL/FNL _	FEL/FWL		
		FSL/FNL _	FEL/FWL		RECE
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	THOUSE	
	·	FSL/FNL	FEL/FWL	1	
		FSL/FNL _	FEL/FWL		-
		FSL/FNL	FEL/FWL		
		FSL/FNL _	FEL/FWL		

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

Form KSONA-1 July 2014 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.

Name: RICHARD I. FERTISS  Surface Owner Information:  Name: RICHARD I. FERTISS  Address 1:  Oncomparity State: RS Zip: 66732 +  Address 2:  City: ELSHORE State: RS Zip: 66732 +  If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owner information are preliminary non-brinding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted with the form of the form C-1 plat, Form CB-1, Form T-1, or Form CP-1 that I am filling in connection with this form; 2) if the form Deing filed is a Form C-1 or Form CB-1, Form CB-1, Form T-1, or Form CP-1 that I am filling in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, Form CB-1, Form T-1, or Form CB-1 have not provided this information to the surface owner(s). To mitigate the additional cost of the register of the KCC With this form as may be entered on the Form C-1 or Form CB-1, the plat(s) required by this form; 2) if the form being filed is a Form C-1 or Form CB-1, Form T-1, or Form CB-1 that I am filling in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, Form T-1, or Form CB-1 that I am filling in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, Form T-1, or Form CB-1 that I am filling in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, form F-1, or Form CB-1, Form T-1, or Form CB-1, Form T-1, or Form CB-1, Form T-1, or Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form CB-1, Form T-	OPERATOR: License #	Well Location:
Address 2:	Name: Elitarisco Elicity LLO	
Address 2:  City: Dewey State: OK Zip: 74029 +	P.O. Box 578	AT / EM
Contact Person: Hay Gillbert    Source	Address 2:	Loggo Nome: FEWINS 9 Main #4 9-D2
Contact Person: Hay Gillbert    Source	City: State: Zip:+	If filing a Form T-1 for multiple wells on a lease enter the legal description of
Phone: (620 820-9687 Fax:   Fa	Contact Porton: Ray Gilbert	the lease below:
Surface Owner Information:  Name: RICERAD L FEWINS	Phone: ( 620 820-9687 Fax: ( )	
Name: RICHARD L FEWINS  Address 1: 0000 3600 ST  When filing a Form T-1 involving multiple surface owners, attach an additional sheet issing all of the information to the left for each surface owners. 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.  City: ELSMORE State: KS Zip: 66732 +  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 fanct) the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations showing 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 with a representation of the following:  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 filling 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 must provide the name and address of the surface owner by filling out the top section of this form and 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 F	Email Address: raygilbert@cableone.net	
Address 1:	Surface Owner Information:	
Address 1:	Name: RICHARD L FEWINS	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 2:	Address 1:0000 3600 ST	sheet listing all of the information to the left for each surface owner. Surface
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Date: Signature of Operator or Agent: Title:	select one of the following:  I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form; and 3) my operator name, address, phone number, form; and that I am filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form; and a more provided this information to the surface owner(s KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to	Cathodic Protection Borehole Intent), you must supply the surface aware and the stank batteries, pipelines, and electrical lines. The locations should the plat ared on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  The locations should be plat as a separate plat may be submitted. The located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address.  The located: 1) a copy of the Form CB-1, the plat(s) required by this fax, and email address.  The located: 1) a copy of the Form CB-1, the plat(s) required by this fax, and email address.  The locations should be surface by the Form CB-1, the plat(s) required by this fax, and email address.  The locations should be surface by the Form CB-1 plat, or a separate plat may be submitted. The series is a copy of the surface by this form cannot be sufface owner by filling out the top section of this form and the KCC, which is enclosed with this form.  The locations should be plat as a separate plat may be submitted. The locations is a surface of the surface by this form cannot be plated by the plat and the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.  The locations should be plated by the plat