### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-July 2014 Form must be Signed Form must be Signed All blanks must be Siled

# REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form KSONA-1, Certification of Compliance with the Kanaas Surface Owner Notification Act, MUST be submitted with this form. Check Applicable Boxes: 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. 23 /830 -1035941209-Gas Gathering System: Saltwater Disposal Well - Permit No.: \_ - Sec. 14 Twp. 33 R. 18 ₩ Spot Location: \_\_\_ \_\_\_feet from N/SLine feet from E / W Line Legal Description of Lease: \_\_\_ Enhanced Recovery Project Permit No.: Entire Project: Yes No LABETTE County: Number of Injection Wells CHEROKEE COALS Production Zone(s): CHEROKEE BASIN COAL AREA Field Name: Injection Zone(s):\_ \*\* Side Two Must Be Completed. NA 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 Workover ne Settling Haul-Off 34420/ **Brian Lingard** Past Operator's License No. Contact Person: **Exodus Gas & Oil LLC** 281-822-3939 Past Operator's Name & Address: 1001 McKinney St. Ste. 804 Houston, TX 77002 5/5/2016 Date: Managing Partner Signature: 35018 Raymond L. Gilbert New Operator's License No. Phone: 620-820-9687, 918-331-6708 KCC WICHITA **Entransco Energy LLC** New Operator's Name & Address: JUN 1 0 2016 P.O. Box 578 Dewey, OK 74029 Oil / Gas Purchaser: 5/5/2016 Date: Field Operations Manager Signature: NA Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 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 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 DISTRICT \_ Mail to: Past Operator

#### Side Two

#### Must Be Filed For All Wells

	No.: <u>23/830<sup>-103594120</sup></u>		_	NW/	4
* Lease Name: _			* Location:	M#/	
Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet fro		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
6-14	15-099-24077	Circle  3123 FSD FNL	Circle 3638 FEL/FWL	GAS	PROD
4-14	15-099-24078	4638 FSL)FNL	4503 FEDFWL	GAS	TA'D
1-14	15-099-23228	3955 FSUFNL	4054 FELFWL	GAS	PROD
		FSL/FNL	FEL/FWL	13. 97760	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
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		FSL/FNL	FEL/FWL	K	JUN 1 0 2016
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		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 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.

OPERATOR: License # 35018  Name: Entransco Energy LLC	Well Location: Sec. 14 Twp. 33 S. R. 18 ★ East West
Address 1: P.O. Box 578	County: LABETTE
Address 2:  City: Dewey  Contact Person: Ray Gilbert  Phone: () 820-9687  Email Address: raygilbert@cableone.net	Lease Name: HITE Well #:
Surface Owner Information:           Name:         FRANKIE R. & GAYLE L. HITE           Address 1:         1499 18000 RD           Address 2:         City:           PARSONS         State:           KS         Zip:           67357         +	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.
are preliminary non-binding estimates. The locations may be enter	rathodic Protection Borehole Intent), you must supply the surface owners lated that tank batteries, pipelines, and electrical lines. The location of the plat and on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
	IIIN IO ZOIO
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Noti owner(s) of the land upon which the subject well is or will	RECEIVED IN THE PROOF OF THE PR
I certify that, pursuant to the Kansas Surface Owner Notiowner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form I have not provided this information to the surface owner(s) KCC will be required to send this information to the surface.	RECEIVED ice Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address.  I acknowledge that, because I have not provided this information, the se owner(s). To mitigate the additional cost of the KCC performing this less of the surface owner by filling out the top section of this form and
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form; and the 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 add that I am being charged a \$30.00 handling fee, payable to	RECEIVED ice Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address.  1. I acknowledge that, because I have not provided this information, the se owner(s). To mitigate the additional cost of the KCC performing this liress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.  It is given by the form of the form of the form, the KSONA-1