KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-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,
MUST be submitted with this form

Check Applicable Boxes: MUST be subr	nitted 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.: 1038098339 23188
Gas Gathering System:	03.0
Saltwater Disposal Well - Permit No.:	Lease Name: MORTON
Spot Location:feet from N / S Line	
feet from E / W Line	Legal Description of Lease: M/2
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: LABETTE
Number of Injection Wells **	Production Zone(s): CHEROKEE COALS
Field Name: CHEROKEE BASIN COAL AREA	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	
(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
Top of Ph.	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover O2 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
Title: Managing Partner	Date:
Tibe:	Signature:
35018	Paymond I Cilhart
New Operator's License No.	Contact Person: Raymond L. Gilbert
New Operator's Name & Address: Entransco Energy LLC	Contact Person: Raymond L. Gilbert Phone: 620-820-9687, 918-331-6708 KCC WISHITA
P.O. Box 578 Dewey, OK 74029	Oil / Gas Purchager: IVA
	Date: 5/5/2016 RECEIVED
Field Operations Manager	Signature: RECL.
	Signature.
Acknowledgment of Transfer: The above request for transfer of injection	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	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.:
	permission by 1900.
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR	PRODUCTION 7-18-10 WILL 18 2016
Mail to: Past Operator New Operato	District

Side Two

Must Be Filed For All Wells

* Lease Name: _	NORTON	1	* Location:		N/2
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
8-29	15-099-24420 🗸	3498 Circle	Circle FEDFWL	GAS	PROD
		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 _			
-		FSL/FNL _	FEL/FWL _		
		FSL/FNL _	FEL/FWL		
		FSL/FNL	FEL/FWL _		
		FSL/FNL _	FEL/FWL _		
		FSL/FNL			
		FSL/FNL _			KCC WICHIT
		FSL/FNL			WIN IN LOVE
		FSL/FNL	FEL/FWL		RECEIVE
		FSL/FNL	FEL/FWL		-
			FEL/FWL _		
		FSL/FNL	FEL/FWL _		
		FSL/FNL			
			FEL/FWL _		
-			FEL/FWL		
			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 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	
Endansco energy i i C	Well Location:
Name: P.O. Box 578	
Address 1:	County: LABETTE
Address 2:	Lease Name: NORTON Well #: 8-29
City: Dewey State: OK Zip	:
Contact Person: May GIIDEIL	, , , , , , , , , , , , , , , , , , ,
Phone: () 820-9687	N/2 KCC WIL
Phone: (620) 820-9687 Fax: (Email Address: raygilbert@cableone.ne	et) N/2 KCC WIC
Surface Owner Information:	RECE
Name: NORTON FAMILY TRU	IST
Address 1: 451 11000 RD	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
Address 2:	Owner information can be found in the records of the register of deeds for the
City: MOUND VALLEY State: KS Zip:	county, and in the real estate property tax records of the county treasurer.
f 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
are preliminary non-binding estimates. The loc	(Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and tions of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat ations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
ire preliminary non-binding estimates. The local ideact one of the following: I certify that, pursuant to the Kansas Sowner(s) of the land upon which the succession of the land upon which the land upon w	Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface abject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this s, phone number, fax, and email address.
are preliminary non-binding estimates. The local select one of the following: I certify that, pursuant to the Kansas sowner(s) of the land upon which the succept that I am filing in connection with form; and 3) my operator name, addres I have not provided this information to the KCC will be required to send this information, I acknowledge that I must provide	Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface abject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form this form: 2) if the form being filed is a Form C-1 or Form CB-1, the plate of the surface the form: 2) if the form being filed is a Form C-1 or Form CB-1, the plate of the surface this form: 2) if the form being filed is a Form C-1 or Form CB-1, the plate of the surface the surface that the surface of the form being filed is a Form C-1 or Form CB-1.
Are preliminary non-binding estimates. The local select one of the following: I certify that, pursuant to the Kansas sowner(s) of the land upon which the such comments of the form; and 3) my operator name, addressing the land upon which the such comments of the form; and 3) my operator name, addressing the land upon which the such comments of the form; and 3) my operator name, addressing the second entire to send this information to the following that I am being charged a \$30.00 handle choosing the second option, submit payments.	Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface abject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this s, phone number, fax, and email address. The surface owner(s). I acknowledge that, because I have not provided this information, the nation to the surface owner(s). To mitigate the additional cost of the KCC performing this the name and address of the surface owner by filling out the top section of this form and ing fee, payable to the KCC, which is enclosed with this form.
I certify that, pursuant to the Kansas sowner(s) of the land upon which the su CP-1 that I am filing in connection with form; and 3) my operator name, addres I have not provided this information to the KCC will be required to send this information, I acknowledge that I must provide that I am being charged a \$30.00 handle choosing the second option, submit payment and the associated Form C-1, Form CB-1, whereby certify that the statements made herein	Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface abject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this s, phone number, fax, and email address. The surface owner(s). I acknowledge that, because I have not provided this information, the nation to the surface owner(s). To mitigate the additional cost of the KCC performing this the name and address of the surface owner by filling out the top section of this form and ing fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 Form T-1, or Form CP-1 will be returned.
I certify that, pursuant to the Kansas sowner(s) of the land upon which the su CP-1 that I am filing in connection with form; and 3) my operator name, addres I have not provided this information to the KCC will be required to send this information, I acknowledge that I must provide that I am being charged a \$30.00 handle choosing the second option, submit payment arm and the associated Form C-1, Form CB-1,	Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface abject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this s, phone number, fax, and email address. The surface owner(s). I acknowledge that, because I have not provided this information, the nation to the surface owner(s). To mitigate the additional cost of the KCC performing this the name and address of the surface owner by filling out the top section of this form and ing fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 Form T-1, or Form CP-1 will be returned. Field Operations Manager