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: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 1018923944 Gas Gathering System: Lease Name: GOINS A Saltwater Disposal Well - Permit No.: _ - n/2 - nw - nw Sec. 18 Twp. 30 feet from Spot Location: _ S Line Legal Description of Lease: nw/4 sec 18, T30S R18E feet from Enhanced Recovery Project Permit No.: County: Neosho Entire Project: Yes No Number of Injection Wells Production Zone(s): Summit, Mulky Field Name: THAYER Injection Zone(s): ** Side Two Must Be Completed. Surface Pit Permit No .: feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) W Line of Section feet from Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling Brian Lingard Past Operator's License No. Contact Person: Phone: _281-822-3939 Exodus Gas & Oil LLC Past Operator's Name & Address: Date: 5/5/2016 1001 McKinney St., Suite 804 Houston, TX 77002 Title: Manager Signature: 35018 Contact Person; Raymond L. Gilbert New Operator's License No. Phone: 620-820-9687, 918-331-6708 New Operator's Name & Address: Entransco Energy, LLC P.O. Box 578 Dewey, OK 74029 Oil / Gas Purchaser 5/5/2016 Date: Field Operations Manager Signature: 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 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 DISTRICT **PRODUCTION**

New Operator

Mail to: Past Operator

Side Two

Must Be Filed For All Wells

* Lease Name: GOINS A			* Location: _ r	* Location: _nw/4 sec 18, T30S R18E		
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
18-1	15-133-25632	4950 Sylfan	4470 EDFML	gas	producing	
	-	FSL/FNL	FEL/FWL		_	
	<u> </u>	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		11	
		FSL/FNL	FEL/FWL	·		
		FSL/FNL	FEL/FWL			
	<u>,</u>	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL .		-	
	Sec. 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		KCC 4413	
		FSL/FNL	FEL/FWL		SEP 20 20	

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.

25040			
OPERATOR: License # 35018	Well Location:		
Name: Entransco Energy LLC			
Address 1: P.O. Box 578	County: Neosho		
Address 2:	Lease Name: Goins A Well #: 18-1		
City: Dewey State: OK Zip: 74029 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: Ray Gilber	the lease below:		
Phone: (620) 820-9687 Fax: ()	nw/4 sec 18, T30S R18E		
Email Address: Surface Owner Information: Name: Elbert and Delores Goins			
Name.	when hing a roth rer involving multiple surface owners, attach an additional		
Address 1: 3405 Brown Rd	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		
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: Thayer State: KS Zip: 66776			
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plat at the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
CP-1 that I am filing in connection with this form; 2) if the form be form, and 3) my operator name, address, phone number, fax, an	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this		
	ner(s). To mitigate the additional cost of the KCC performing this		
f choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
hereby certify that the statements made herein are true and correct to the	be best of my knowledge and belief.		
Signature of Operator or Agent.	Title. Field Operations Manager		