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 submitted with this form. Oil Lease: No. of Oil Wells Effective Date of Transfer: Gas Lease: No. of Gas Wells __1 KS Dept of Revenue Lease No.: 1928648462-224641/ Gas Gathering System: Lease Name: KING 17-4 Saltwater Disposal Well - Permit No.: ___ Spot Location: ______ feet from N / S Line - W/2 - W/2 - W/2 Sec. 17 Twp. 30 R. 18 VE W _____feet from E / W Line Legal Description of Lease: Enhanced Recovery Project Permit No.: ____ Entire Project: Yes No County: NEOSHO Number of Injection Wells Production Zone(s): CHEROKEE COALS Field Name: MOREHEAD Injection Zone(s):_ ** Side Two Must Be Completed. Surface Pit Permit No.: NA __ feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) E / W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling Past Operator's License No. 34420 Exp. 7 Brian Lingard Contact Person: _ Past Operator's Name & Address: _ Exodus Gas & Oil LLC Phone: 281-822-3939 Date: __ 1001 McKinney St. Ste. 804 Houston, TX 77002 Title: Managing Partner Signature: 35018 🗸 Contact Person: Raymond L. Gilbert New Operator's License No. .. New Operator's Name & Address: Entransco Energy LLC Phone: 620-820-9687, 918-331-6708 Received KANSAS CORPORATION COMMISSION P.O. Box 578 Dewey, OK 74029 Oil / Gas Purchaser: SEP 26 2016 Date: 5/11/2016 CONSERVATION DIVISION Title: Field Operations Manager Signature: _ Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #_ NA 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 ______. Recommended action: _ permitted by No.: _ Authorized Signature DISTRICT _ Mail to: Past Operator _____ New Operator_ District

Side Two

Must Be Filed For All Wells

* Lease Name	KING 17-4	* Location: NW/4 SEC. 17-30S-18E			
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)
17-4	15-133-25994 🗸	2640 (S)	4930	GAS	PROD
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		_
		F\$L/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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			FEL/FWL		
		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		Received KANSAS CORPORATION COMMISSIO
		F\$L/FNL	FEL/FWL		SEP 26 2016
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION WICHITA, KS
-		FSL/FNL	FEL/FWL		
			FEL/FWL		
			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.

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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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (C	athodic Protection Borehole Intent) 🗵 T-1 (Transfer) 🔲 CP-1 (Plugging Application)
OPERATOR: License # 35018	Well Location:
Name: Entransco Energy LLC	
Address 1: P.O. Box 578	County: NEOSHO
Address 2:	County: NEOSHO Lease Name: KING Well #: 17-4
City: Dewey State: OK Zip: 74029 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Pay Gilbort	the lease below:
Phone: (620) 820-9687 Fax: ()	$M_{O(2^{-\alpha})}$
Contact Person: Nay Gilbert Phone: (620) 820-9687 Fax: () Email Address: raygilbert@cableone.net	1.19 Mar
Surface Owner Information: Name: JEFF KEPHART Address 1: 4230 DOUGLAS RD. Address 2:	When filling 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
Address 2:	county, and in the real estate property tax records of the county treasurer.
City: THAYER State: KS Zip: 66776	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:	batteries, pipelines, and electrical lines. The locations shown on the plat
•	
	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
KCC will be required to send this information to the surface own	knowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and CC, which is enclosed with
If choosing the second option, submit payment of the \$30.00 handling to form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.
5/11/2016	Field Operations Manager
Date: Signature of Operator or Agent:	Title: