District

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: Effective Date of Transfer: 06/22/16 Oil Lease: No. of Oil Wells _ Gas Lease: No. of Gas Wells _ 1 225735 6 KS Dept of Revenue Lease No.: Gas Gathering System:_ Lease Name: _ Lee, Roger J Saltwater Disposal Well - Permit No.: ___ _ S2 _ NE _ SE _ Sec. 6 _ Twp. 31S _ R _ 18E _ VE _ W __ feet from N / S Line Legal Description of Lease: SE feet from E / W Line Enhanced Recovery Project Permit No.: _ Labette Entire Project: Yes No County: Number of Injection Wells _ Production Zone(s): Arbuckle Dolomite CHEROKEE BASIN COAL AREA Injection Zone(s):_ ** Side Two Must Be Completed. Surface Pit Permit No.: ___1509923407 feet from N / S Line of Section (API No if Drill Pit, WO or Haul) feet from E / W Line of Section Settling Haul-Off Drilling KHU Type of Pit: Emergency Workover Stephen Moriarty 33343 🗸 Past Operator's License No. Contact Person: Phone: _405-600-7704 Postrock Midcontinent Production LLC Past Operator's Name & Address: 210 Park Ave, Okla, City, OK 73102 Date: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod Signature: New Operator's License No. 35341 🗸 Contact Person: Jim Allen KCC WICHITA New Operator's Name & Address: River Rock Operating, LLC Phone: 405-606-7481 211 N. Robinson, Suite 200 Oil / Gas Purchaser: BP Energy Company JUL 27 2016 Oklahoma City, OK 73102 7/11/16 RECEIVED Vice President - Operations Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 1509923407 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 Recommended action: permitted by No .: __ Date: Authorized Signature Authorized Signature DISTRICT _

Mail to: Past Operator

Side Two

Must Be Filed For All Wells

* Lease Name: Lee, Roger J			* Location:S	*Location: S2 NE SE 6-31S-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)	
6-1	1509923407 🗸	509923407 / 1705 FSL 652 FEL		Gas	Producing	
8		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	FEL/FWL		_	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL .			
		FSL/FNL	FEL/FWL .			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		JUL 27 2016	
		FSL/FNL	FEL/FWL		JUL 27 2016	
		FSL/FNL	FEL/FWL		RECEIVED	
		FSL/FNL	FEL/FWL _			
uname (FSL/FNL	FEL/FWL _	· · · · · · · · · · · · · · · · · · ·	-	
		FSL/FNL	FEL/FWL _	100		

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.

Select the corresponding form being filed: C-1 (Inlent) CB-	-1 (Calhodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 35341	Well Location;		
Name: River Rock Operating, LLC			
Address 1: 211 North Robinson	County Labette		
Address 2: Suite 200	Lease Name: Lee, Roger J Well #: 6-1		
City: Oklahoma City State: OK Zip: 73102 +			
Contact Person: Jim Allen	If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:		
	SE		
Email Address:jim.allen@riverrockoperating.com	.TA		
Email Address:jim.alien@nverrockoperating.com	HI.		
Phone: (405) 606-7481 Fax: (405) 606-7483 Email Address: jim.allen@riverrockoperating.com Surface Owner Information: Name: LEE, ROGER J Address 1: LEE, CAROL A Address 2: 3015 DIRR AVE City: PARSONS State: KS Zip: 67357 +	When filing a Form T-1 involving multiple surface owners, attach an additional sheet fisting 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.		
the KCC with a plat showing the predicted locations of lease roads, ta	nodic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.		
KCC will be required to send this information to the surface of	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this is of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form.		
If 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 CF	g fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.		
I hereby certify that the statements made herein are true and correctly	o the best of my knowledge and belief.		
Date: 7/18/16 Signature of Operator or Agent:	Vice President - Operations Title:		