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:	1			
Oil Lease: No. of Oil Wells	Effective Date of Transfer: 06/22/16 KS Dept of Revenue Lease No.: 227999			
Gas Lease: No. of Gas Wells				
Gas Gathering System:	Lease Name: Manners, Alfred E S2 _ SW. NE_Sec. 36 _ Twp. 31S _ R. 18E _ V E _ W			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	the second			
feet from L E / W Line	Legal Description of Lease: <u>W2 NE</u>			
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	Injection Zone(s):			
** Side Two Must Be Completed.				
Surface Pit Permit No.:1509924007	feet from N / S Line of Section			
(API No if Drill Pit, WO or Haul)	feet from F / W Line of Section			
Type of Pit Emergency Burn Settling	Haul-Off Workover Drilling			
The state of the s				
Past Operator's License No	Contact Person: Stephen Moriarty			
Past Operator's Name & Address: Postrock Midcontinent Production LLC	Phone: 405-600-7704			
210 Park Ave, Okla. City, OK 73102	Date: 7/13/14			
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Signature: Trus tee			
New Operator's License No. 35341	Contact Person: Jim Allen			
New Operator's Name & Address: River Rock Operating, LLC				
211 N. Robinson, Suite 200	Cit (Coa Burshager, BP Energy Company			
Oklahoma City, OK 73102	7/11/10			
	OCCEIVED.			
Title: Vice President - Operations	Signature: RECEIV			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #1509924007 has been			
	Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the	to the second se			
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			
	enter allender af Provincialista des recla Caudolistes Aprellerando des region Republicado de Caudolistes Aprellerando de Cregorio Republicado de Caudolistes Aprellerando Aprellerando de Caudolistes Aprellerando de Caudolistes Aprellerando de Caudolistes Aprellerando de Caudolistes Aprellerando Ap			
Permit No.: Recommended action:	permitted by No.:			
Date:	Date:			
Date:	Authorized Signature			
DISTRICT EPR 9/20/16 F	PRODUCTION 9-71-16 UISEP 21 2016			
Mail to: Past Operator New Operato	200 - 200 -			

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 227999		mercus.			
* Lease Name: Manners, Alfred E			*Location: S2 SW NE 36-31S-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)	
36-1	1509924007	2255 FNL 1972 I	FEL	Gas	Producing	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	-		
	A	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		×3	
		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 _		<u> 2</u>	
		FSL/FNL	FEL/FWL _			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL _			
		FSL/FNL	FEL/FWL		- WICHITA	
		FSL/FNL	FEL/FWL	K	CC 4410	
		FSL/FNL	FEL/FWL		JUL 27 2016 RECEIVED	
		FSL/FNL				
		FSL/FNL				

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	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 35341	Well Location:		
Name: River Rock Operating, LLC	<u>S2 - SW-NE</u> Sec. 36 Twp, 31S S. R. 18E 🔀 East 🗌 West		
Address 1: 211 North Robinson	County Labette		
Address 2: Suite 200	Lease Name: Manners, Alfred E Well #: 36-1		
City: Oklahoma City State: OK Zip: 73102 +	If filling a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Baroon, Jim Allen	the lease below:		
Phone: (405) 606-7481 Fax: (405) 606-7483	W2 NE		
Email Address: jim.allen@riverrockoperating.com			
- Mic	dfn		
Surface Owner Information:			
Name: MANNERS LIV TR, VIRGINIA E	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: MANNERS LIV TR, ALFRED E	W2 NE 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.		
Address 2; 22044 UDALL RD			
City: PARSONS State: KS Zip: 67357 +			
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 I have not provided this information to the surface owner(s). I ack	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. It (House Bill 2032), I have provided the following to the surface 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 d email address. In the 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		
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 CP-1			
I hereby certify that the statements made herein are true and correc∖ to ∦	he best of my knowledge and belief.		
Date: 7/18/16 Signature of Operator or Agent:	Vice President - Operations Title:		