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 227815 KS Dept of Revenue Lease No .: Gas Gathering System:_ Lease Name: Mustain, Donald R Saltwater Disposal Well - Permit No.: ____ _- <u>SE NE Sec. 29 Twp. 28S R. 16E</u> VE W feet from N/ S Line Legal Description of Lease: SE NE feet from E / W Line Enhanced Recovery Project Permit No.:_ Entire Project: Yes No Wilson Number of Injection Wells _ Production Zone(s): Cherokee Coals, Multiple Cherokee Basin Coal Area Field Name: Injection Zone(s):_ ** Side Two Must Be Completed. Surface Pit Permit No.: 1520526545 feet from N / S Line of Section (API No if Drill Pit, WO or Haul) feet from E / W Line of Section 27 cp. A/16/16 Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling 33343 Stephen Moriarty Past Operator's License No. Contact Person: 405 600 7704 EL

Past Operator's Name & Address: Positock Middontinent Production LLC	Phone: 403-500-7704
210 Park Ave, Okla. City, OK 73102	Date: 7/8/14
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Signature: Trotel
New Operator's License No35341 _/	Contact Person: Jim Allen
New Operator's Name & Address: River Rock Operating, LLC	Phone: 405-606-7481 KCC WICh
211 N. Robinson, Suite 200	Oil / Gas Purchaser: BP Energy Company
Oklahoma City, OK 73102	Pate: 7/6/16
Title: Vice President - Operations	Signature: RECEIV
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the convey and	ion Commission. This acknowledgment of transfer pertains to Kansas Corporation
is acknowledged a	s 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
DISTRICT EPR	PRODUCTION 107270 UCI 12 2016
Mail to: Past Operator New Ope	prator District
KCC - Conservation Division, 266 N Main	St. Ste 220 Wichita KS 67202-1513

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 227815				
* Lease Name:	Mustain, Donald R	* Location: SE NE 29-28S-16E			
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)
29-1	1520526545√	1969 FNL 810 FEL		Gas	Producing
	water the second	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		
		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEL/FWL		
200000000000000000000000000000000000000		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	W	
		FSL/FNL	FEL/FWL		
	Military and the state of the s	FSL/FNL	FEL/FWL		***************************************
		FSL/FNL	FEL/FWL .		W////
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		JUL 2 7 2016
		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	12.12.1 000 NO		
		FSL/FNL	FEL/FWL .		
and a suppression of		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

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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.

	(Cathodic Protection Borehole Intent) 🗵 T-1 (Transfer) 🗌 CP-1 (Plugging Application)
OPERATOR: License # 35341	Well Location:
Name: River Rock Operating, LLC	SE-NE Sec. 29 Twp. 28S S. R. 16E 🕱 East West
Address 1: 211 North Robinson	County: Wilson
Address 2: Suite 200	Lease Name: Mustain, Donald R Well #: 29-1
City: Oklahoma City State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description o
Contact Person: Jim Allen	the lease below:
Contact Person: Jim Allen Phone: (405) 606-7481 Fax: (405) 606-7483	SE NE
CANCH	
Surface Owner Information: Name: Mustain, Donald & Wanda Address 1: P O BOX 23 Address 2: City: ALTOONA State: KS Zip: 66710 +	When filing a Form T-1 involving multiple surface owners, attach an additional Effect 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.
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and A batteries, pipelines, and electrical lines. The locations shown on the plat In the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
CR-1 that f am filing in connection with this form; 2) if the form I form; and 3) my operator name, address, phone number, fax, a I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface owner.	ocated: 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. cknowledge that, because I have not provided this information, the vner(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-	fee with this form. If the fee is not received with this form, the KSONA-1 I will be returned.
I hereby certify that the statements made herein are true and correct to Date: 7/6/16 Signature of Operator or Agent:	the best of myknowledge and belief. Vice President - Operations