### 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: Oil Lease: No. of Oil Wells \_\_\_\_1 Effective Date of Transfer: 06/22/2016 Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No .: \_ Gas Gathering System: Lease Name: Estes Rev Trust Saltwater Disposal Well - Permit No.: \_\_\_\_ SW NE SE Sec. 4 Twp. 29S R. 16E VE W feet from N / S Line Legal Description of Lease: SW NW NE SE feet from E / W Line Enhanced Recovery Project Permit No :\_ Wilson Entire Project: Yes No County Number of Injection Wells \_\_\_ Production Zone(s): Bartlesville Altoona Field Name: Injection Zone(s):\_ \*\* Side Two Must Be Completed. Surface Pit Permit No.: 1520528138 feet from N / S Line of Section (API No. if Drill Pit. WO or Haul) 07 c15. Type of Pil. W Line of Section Emergency Settling Burn Haul-Off Workover Drilling 33343 Stephen Moriarty Past Operator's License No. Contact Person: Postrock Midcontinent Production LLC Phone: 405-600-7704 Past Operator's Name & Address: 210 Park Ave, Okla. City, OK 73102 Date: Title: Slephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod Signature: RATION COMMISSION Contact Person: \_\_\_\_\_Jim\_Allen New Operator's License No. . 1111 27 2016 New Operator's Name & Address: River Rock Operating, LLC Phone: 405-606-7481 CONSERVATION DIVISION
Oil / Gas Purchaser: HollyFrontier Refining & Marketing LLCWICHITA, KS 211 N. Robinson, Suite 200 Oklahoma City, OK 73102 7/11/2016 Vice President - Operations Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #\_1520528138 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 DISTRICT -Mail to: Past Operator New Operator District

#### Side Two

#### Must Be Filed For All Wells

*Lease Name: Estes Rev Trust			9	SW NW NE SE 4-29S-16E		
* Lease Name: _	Lites Rev Hust		*Location:*			
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	
4-3	1520528138	2000 FSL 1220 FEL		Oil	Producing	
		FSL/FNL	FEL/FWL	1		
		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 _	Receive		
		FSL/FNL	FEL/FWL _	KANSAS CORPORATION	COMMISSION	
		FSL/FNL	FEL/FWL	JUL 27		
		FSL/FNL	FEL/FWL	CONSERVATION DIVISION WICHITA, KS		
		FSL/FNL	FEL/FWL _			
		FSL/FNL	FEL/FWL _			
		FSL/FNL	FEL/FWL _		Andrew State Control of the Control	
		FSL/FNL	FEL/FWL			

A separate sheet may be attached if necessary

<sup>\*</sup>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 (	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 35341	Well Location:		
OPERATOR: License # 35341  Name: River Rock Operating, LLC	SW - NW - NE - SE Sec. 4 Twp. 29S S. R. 16E X East West County: Wilson		
Address 1: 211 North Robinson			
	Lease Name: Estes Rev Trust Well #: 4-3		
Address 2: Suite 200  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 of the lease below:		
405 606-7481 5 405 606-7483	SW NW NE SE		
Email Address: jim.allen@riverrockoperating.com	<sub>MSSION</sub>		
Surface Owner Information:  Name: Estes, Barbara A. Trust  Address 1:	When filing a Form T-1 involving multiple surface owners, attach an additional when filing 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.		
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		
▼ I certify that, pursuant to the Kansas Surface Owner Notice Ac	cated: 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 d email address.  Knowledge that, because I have not provided this information, the ter(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 fe 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 slatements made herein are true and correct to the Date: 7/11/2016 Signature of Operator or Agent:	ne best of my knowledge and belief.  Vice President - Operations  Title:		