### 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 \_ 227834 KS Dept of Revenue Lease No.: Gas Gathering System; Lease Name: Carter, Gale D Saltwater Disposal Well - Permit No.: \_\_\_ - <u>NE. SE Sec. 13 Twp. 28S R. 16E</u> \_\_ feet from N / S Line Legal Description of Lease: NE SE \_\_ feet from \_\_ E / \_\_ W Line Enhanced Recovery Project Permit No.: Entire Project: Yes No Wilson Number of Injection Wells Production Zone(s): Cherokee Coals Cherokee Basin Coal Area Field Name: Injection Zone(s):\_ \*\* Side Two Must Be Completed. Surface Pit Permit No.: \_\_1520526616 feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) 2x cus 8/10/16 W Line of Section Type of Pit: Emergency Settling Haul-Off Workover Drilling Past Operator's License No. Stephen Moriarty Contact Person: Phone: \_405-600-7704 Postrock Midcontinent Production LLC Past Operator's Name & Address: 210 Park Ave, Okla. City, OK 73102 Date: Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod Signature: Received Contact Person: Jim Allen New Operator's License No. KANSAS CORPORATION COMMISSION New Operator's Name & Address: River Rock Operating, LLC Phone: 405-606-7481 211 N. Robinson, Suite 200 Oil / Gas Purchaser: BP Energy Company CONSERVATION DIVISION Oklahoma City, OK 73102 WICHITA, KS 7/1/16 Title: Vice President - Operations Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #\_\_\_1520526616 has been 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 New Operator

#### Side Two

#### Must Be Filed For All Wells

* Lease Name:	Carter, Gale D	*Location: NE SE 13-28S-16E			
Well No.	API No (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)  2015 FSL 694 FEL			Well Status (PROD/TA'D/Abandoned)
13-1	1520526616				Producing
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	***************************************	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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	***************************************	FSL/FNL	FEL/FWL		Received
		FSL/FNL	FEL/FWL		JUL 2 7 2016  CONSERVATION DIVISION—WICHITA, KS
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		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		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 (Intent) CB-1	(Cathodic 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: Wilson		
Address 2: Suite 200	Lease Name: Carter, Gale D Well #: 13-1		
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:		
Phone: (405 ) 606-7481 Fax: (405 ) 606-7483	NE CE		
Email Address:jim.allen@riverrockoperating.com	NE SE		
Email Address: _jim.allen@riverrockoperating.com  Received Receive	SION		
Surface Owner Information:  Name: _Carter, Gale D & Retha M  Address 1:20966 1500 RD  Address 2:  City: _CHANUTE State: KSZip: 66720 _ +	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.		
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
CP-1 that I 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	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		
task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the k	of the surface owner by filling out the top section of this form and (CC, 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 CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief		
Date: 7/1/16 Signature of Operator or Agent:	Vice President - Operations		