### 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: MUST be subm	ilted with this form.
Oil Lease: No. of Oil Wells	Effective Date of Transfer: 06/22/16
Gas Lease No. of Gas Wells **	KS Dept of Revenue Lease No.: 227700
Gas Gathering System:	Lease Name: Carter, Gale D
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease: <u>SE SW</u>
Enhanced Recovery Project Permit No :	
Entire Project: Yes No	County: Wilson
Number of Injection Wells**	Production Zone(s): Cherokee Coals, Multiple
Field Name: Cherokee Basin Coal Area	Injection Zone(s):
** Side Two Must Be Completed.	
Surface Pit Permit No.: 1520526580	feet from N / S Line of Section
Rit cut all le (API No il Drill Pit, WO or Haul)	
	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Past Operator's License No33343 _/	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: 7/6/16
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Signature: Trustal
New Operator's License No	Contact Person: Jim Allen
New Operator's Name & Address: River Rock Operating, LLC	Phone 405-606-7481
211 N. Robinson, Suite 200	Oil / Gas Purchaser: BP Energy Company Received KANSAS CORPORATION COMMISS
Oklahoma City, OK 73102	A A
Title: Vice President - Operations	\ - \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Title: Vice i resident- exercises	Signature: CONSERVATION DIVISION WICHITA, KS
A strength of Transfer The phone and for the office of this phone	authorization, surface pit permit #1520526580 has been
	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the a	autove injection mental or bit bennitt.
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
Permit No.: Recommended action:	# 0.000 0000000 <b>1</b> .000
200 - 100 -	permitted by No.:
Data:	Date:
Date:	Authorized Signature 7 1016
DISTRICT EPR 10/26/16 F	PRODUCTION 10-01-10 UIDC1 27 2010
Mail to: Past Operator New Operato	· · · · · ·

#### Side Two

### Must Be Filed For All Wells

KDOR Lease	No.: 227700				
* Lease Name:	Carter, Gale D	* Location: _ SE SW 20-28S-17E			
Well No.	API No (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)  507 FSL 2042 FWL		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
20-1	1520526580 /				
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		1
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		<del></del>
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL		
	Manager of the Control of the Contro	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		Received
		FSL/FNL	FEL/FWL	KAI	NSAS CORPORATION CORNWISSION
		FSL/FNL	FEL/FWL		JUL 27 2016
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION WICHITA, KS
and a resident about the explanation of the explana		FSL/FNL	FEL/FWL		
-		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL _		

A separate sheet may be attached if necessary

<sup>&</sup>lt;sup>a</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.

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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	(Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 35341	Well Location		
Name: River Rock Operating, LLC	<u>SESWSec20Twp28SSR17E</u>		
Address 1: 211 North Robinson	County: Wilson		
Address 2: Suite 200	Lease Name: Carter, Gale D Well #: 20-1		
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 on the lease below:		
Phone: ( 405 ) 606-7481 Fax: ( 405 ) 606-7483	SE SW		
Email Address:jim.allen@riverrockoperating.com			
Email Address: jim.allen@riverrockoperating.com  Received  Received  Surface Owner Information:  KANSAS CORPORATION COM  KANSAS CORPORATION COM  Cartor Galo D & Rotha M	<sub>MN</sub> SSION		
Address 1: 20966 1500 RD  Address 2: City: CHANUTE State: KS Zip: 66720 +  If this form is being submitted with a Form C-1 (Intent) or CB-1 (Catholic Control of CB-1) (Catholic Catholic Cathol	WISIO When Illing a Form 1-1 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.  Odic Protection Borehole Intent), you must supply the surface owners and		
	ok 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 I CP-1 that I am filing in connection with this form; 2) if the form 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.	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this sof 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 will be returned.		
I 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		