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:	ĺ			
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.: 227682 Lease Name: Carter, Gale D			
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location:feet from N / S Line				
feet from L E / W Line	Legal Description of Lease. NE NW			
Enhanced Recovery Project Permit No:	11/1			
Entire Project: Yes No	County: Wilson			
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.: 1520526735	feet from N / S Line of Section			
(API No if 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	Phone: 405-600-7704 Date: 7/6/16 Signature: 7/5/16			
New Operator's License No. 35341	Contact Person:			
New Operator's Name & Address: River Rock Operating, LLC	Phone: 405-606-7481 Received			
211 N. Robinson, Suite 200	Oil / Gas Purchaser: BP Energy Company			
Oklahoma City, OK 73102	Date: 7/1/16 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Title: Vice President - Operations	CONSERVATION DIVISION			
Title:	Signature: WICHITA. KS			
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit #1520526735 has been			
noted, approved and duly recorded in the records of the Kansas Corporation C				
Commission records only and does not convey any ownership interest in the a	Administration (Control of the Control of the Contr			
commodern to construct of the construction of	note injustion in one preparation			
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:	permitted by No.:			
. The state of the				
Date:	Date:			
Authorized Signature	Authorized Signature			
	RODUCTION 10-67-60 401 27 2010			
Mail to: Past Operator New Operator	r District			

Side Two

Must Be Filed For All Wells

*Lease Name: Carter, Gale D			Location: N	*Location: NE NW 30-28S-17E		
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line) 613 FNL 1837 FWL		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned) Producing	
30-2	1520526735 /					
		FSL/FNL	FEL/FWL	***************************************		
		FSL/FNL	FEL/FWL			
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	***************************************		FEL/FWL		Received	
(1974) The sequence of the second sec			FEL/FWL		Received KANSAS CORPORATION COMMISSI	
					JUL 2.7 2016 CONSERVATION DIVISION	
	-		FEL/FWL		WICHITA, KS	
	•		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.

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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	1 (Calhodic 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 #: 30-2
City: Oklahoma City State: OK Zip: 73102 +	
Contact Person: Jim Allen	the lease below:
Contact Person: Jim Allen Phone: (405) 606-7481 Fax: (405) 606-7483	NIT NIA(
Phone: (405) 606-7461 Fax: (405) 606-7465 Email Address:jim.allen@riverrockoperating.com Received Received Received Received Received Surface Owner Information:	NE NW
Received	OWWIESIO.,
Surface Owner Information: KANSAS CORPORATION: Name: Carter, Gale D & Retha M JUL 27 Address 1: 20966 1500 RD CONSERVATION WILCHITM Address 2: City: CHANUTE State: KS Zip: 66720 +	N DNISON N DNISON When filing a Form T-1 involving multiple surface owners, attach an additional A. KS 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, lar are preliminary non-binding estimates. The locations may be entered	odic Protection Borehole Intent), you must supply the surface owners and nk 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 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, and I have not provided this information to the surface owner(s). It is KCC will be required to send this information to the surface o	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this s 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	g fee with this form. If the fee is not received with this form, the KSONA-1 2-1 will be returned.
I hereby certify that the statements made herein are true and correct to	o the best of my knowledge and belief. Vice President - Operations
Date: 7/1/10 Signature of Operator or Agent:	بنب ۱۱/۱/ Title: