SCANNED

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 Compilance with the Kansas Surface Owner Notification Act.

MUST be submitted with this form. Check Applicable Boxes: Oil Lease: No. of Oil Wells 06/22/16 Effective Date of Transfer: Gas Lease: No. of Gas Wells 229407 KS Dept of Revenue Lease No.: Gas Gathering System: Lease Name: Clary, Irene Saltwater Disposal Well - Permit No.:____ _____<u>NE_SW_Sec. 32_Twp. 28S_R, 15E__</u>___W _____feet from N/ S Line Spot Location: Legal Description of Lease: NE SW ___ feet from ___ E / __ W Line Enhanced Recovery Project Permit No.: ___ Entire Project: Yes No Wilson County: Number of Injection Wells Production Zone(s): Winterset Cherokee Basin Coal Area Field Name: Injection Zone(s):_ ** Side Two Must Be Completed. Surface Pit Permit No.: ___1520526692 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 Haul-Off Emergency Settling 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: 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 Oklahoma City, OK 73102 7/1/16 Title: Vice President - Operations Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 1520526692 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 __ PRODUCTION .. Mail to: Past Operator **New Operator** District

Side Two

Must Be Filed For All Wells

ease Name:_	Clary, Irene		*Location: NE SW 32-28S-15E			
Well No.	API No. (YR DRLD/PRE '67) 1520526692	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned	
32-1		2008 FSL 1991 FV	٧L	Gas	Producing	
		F\$L/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL				
		FSL/FNL				

^{*} 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 filled: C-1 (intent) CB-1 (Ca	ulhodic Profection Borehole Intent)	T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 35341 Name: River Rock Operating, LLC Address 1: 211 North Robinson Address 2: Suite 200 City: Oklahoma City State: OK Zip: 73102 + Contact Person: Jim Allen Phone: (405) 606-7481 Fax: (405) 606-7483 Email Address: jim.allen@riverrockoperating.com	County: Wilson Lease Name: Clary, Irene If filing a Form T-1 for multiple the lease below:	2Twp. <u>28S_S.</u> R. <u>15E</u> W EastWest Well #: <u>32-1</u> wells on a lease, enter the legal description of
Phone: (405) 606-7481	Noticen filing a Form T-1 involves sheet listing all of the information can be foul county, and in the real estate	ng multiple surface owners, attach an additional tion to the left for each surface owner. Surface nd in the records of the register of deeds for the property tax records of the county treasurer.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodi the KCC with a plat showing the predicted locations of lease roads, tank to are preliminary non-binding estimates. The locations may be entered on Select one of the following:	patteries, pipelines, and elect	rical lines. The locations shown on the plat
I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loc CP-1 that I am filling in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and	ated: 1) a copy of the Form ing filed is a Form C-1 or Fo	C-1, Form CB-1, Form T-1, or Form
□ I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC	er(s). To mitigate the addition of the surface owner by filling	nal cost of the KCC performing this out the top section of this form and
If choosing the second option, submit payment of the \$30.00 handling to 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 will be returned.	not received with this form, the KSONA-1
I hereby certify that the statements made herein are true and correct to the Date: 7/1/16 Signature of Operator or Agent:	ne best of my kildwledge and	belief. Vice President - Operations Title: