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,

Check Applicable Boxes: MUST be subn	nitted with this form.			
Oil Lease: No. of Oil Wells+	Effective Date of Transfer:06/22/2016 KS Dept of Revenue Lease No.:n/a Lease Name:Grady, James A SE _ NE _ SW_ NW _ Sec. 5 _ Twp. 28S _ R. 17E _ V E _ W			
Gas Lease: No. of Gas Wells**				
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: SE NE SW NW			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County Wilson			
Number of Injection Wells**	Production Zone(s): Bartlesville			
Field Name: Altoona	Injection Zone(s):			
** Side Two Must Be Completed.				
Surface Pit Permit No.: 1520528079 (API No if Dnill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover Drilling			
Past Operator's License No. 33343	Contact Person: Stephen Moriarty			
Past Operator's Name & Address: Postrock Midcontinent Production LLC	Phone: 405-600-7704			
210 Park Ave, Okla. City, OK 73102	Phone: 405-500-7704			
	Date: Trode			
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Signature:			
25214				
New Operator's License No. 35341	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: HollyFrontier Refining & Marketing LLC Received / KANSAS CORPORATION COMMISSION			
Oklahoma City, OK 73102	Date: 7/11/2016			
Title: Vice President - Operations	Signature: JUL 2 / 2016			
	CONSERVATION DIVISION WICHITA, KS			
Acknowledgment of Transfer: The above request for transfer of injection				
	Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the	2909 SE			
	, , , , , , , , , , , , , , , , , , , ,			
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.:			
	,			
Date:	Date:			
Authorized Signature	Authorized Signature			
DISTRICT EPR 10/24/16 F	PRODUCTION 10-25-14 WC 25-2016			
Mail to: Past Operator New Operato	r District			

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: n/a		****			
* Lease Name:	Grady, James A		* Location: SE NE SW NW 5-28S-17E			
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)	
5-5	1520528079 🗸	1900 FNL 1300 FWL		Oil	Producing	
***************************************		FSL/FNL _	FEL/FWL			
		FSL/FNL _	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		***************************************	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		***************************************	
		FSL/FNL	FEL/FWL .			
10 15 3 		FSL/FNL	FEL/FWL _			
		FSL/FNL	FEL/FWL	Receiv Kansas corporatio	ed NI COMMISSION	
		FSL/FNL	FEL/FWL	KANSAS CORPORATION	2016	
		FSL/FNL	FEL/FWL		N DIVISION	
		FSL/FNL	FEL/FWL	WICHITA	A, KS	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL _		***************************************	
***************************************		FSL/FNL	FEL/FWL _			
		FSL/FNL	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.

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	SE - NE - SW - NW Sec. 5 Twp. 28S S. R. 17E ★ East West		
Name: River Rock Operating, LLC Address 1: 211 North Robinson	County: Wilson		
Address 2: Suite 200	Lease Name: Grady, James A Well # 5-5		
Oklahoma City OK - 73102			
Contact Person: Jim Allen	the lease below:		
Contact Person: Jim Allen Phone: (405) 606-7481 Fax: (405) 606-7483	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: SE NE SW NW ONLY OF THE SW NW		
Email Address: jim.allen@riverrockoperating.com ceived	MWW E26		
CORPORATION REPORTED	anto		
Surface Owner Information: Name: Grady James A & Evelyn I Trust	"CION		
Surface Owner Information: Name: Grady, James A. & Evelyn L. Trust	NOWS		
Address 1: owner information can be found in the records of the register of			
City: Chanute State: KS Zip: 66720 +			
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 Acowner(s) of the land upon which the subject well is or will be loce CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, an	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this		
KCC will be required to send this information to the surface owr	knowledge that, because I have not provided this information, the her(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 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-1	ee 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	he best of my knowledge and belief. Vice President - Operations		
Date: 7/11/2016 Signature of Operator or Agent:	Title:		