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 _____1 228638 KS Dept of Revenue Lease No. Gas Gathering System:_ Lease Name: Rausch, John M Saltwater Disposal Well - Permit No.: _ NW. SE sec. 15 Twp. 28S R. 17E VE W _ feet from N / S Line Legal Description of Lease: NW SE feet from E / W Line Enhanced Recovery Project Permit No.: _ Entire Project: Yes No Wilson County: 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.: _ 1520527025 feet from N / S Line of Section (API No if Drill Pit, WO or Haul) E / W Line of Section feet from Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling Stephen Moriarty Past Operator's License No. Contact Person: Postrock Midcontinent Production LLC 405-600-7704 Past Operator's Name & Address: 210 Park Ave, Okla. City, OK 73102 Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod Signature: Contact Person: Jim Allen New Operator's License No. Phone: 405-606-7481 River Rock Operating, LLC New Operator's Name & Address:_ 211 N. Robinson, Suite 200 Oil / Gas Purchaser: BP Energy Company Oklahoma City, OK 73102 7/8/16 Vice President - Operations Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 1520527025 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: Date: Authorized Signature DISTRICT _ Mail to: Past Operator **New Operator**

Side Two

Must Be Filed For All Wells

	No.: 228638				
* Lease Name:	Rausch, John M		* Location:	W SE 15-28S-17E	
Well No	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line) 1980 FSL 1980 FEL		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
15-1	1520527025			Gas	Producing
		FSL/FNL	FEL/FWL	***	
		FSL/FNL	FEL/FWL	/ 	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		***************************************
r		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		white the same of
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	Park Transmission Commence	FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL _		
					KCC WICH!
		FSL/FNL	FEL/FWL		JUL 27 2016
		FSI /FNI	FEL/FWI		RECEIVE
		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			
Address 1: 211 North Robinson	County: Wilson		
Address 2: Suite 200	Lease Name: Rausch, John M Well # 15-1		
City: Oklahoma City State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person: Jim Allen			
Contact Person: Jim Allen Phone: (405) 606-7481 Fax: (405) 606-7483	NW SE		
MICH	TA		
Surface Owner Information:	6		
Name: Rausch, John M	Whon filing a Form T.1 involving multiple confers account to the confers of the c		
Address 1: 24295 CHASE RD RECEIV	D 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.		
Address 2:			
City: CHANUTE State: KS Zip: 66720 +			
the KCC with a plat showing the predicted locations of lease roads, tand are preliminary non-binding estimates. The locations may be entered o	edic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
Select one of the following:			
I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be to CP-1 that I am filling in connection with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, 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		
KCC will be required to send this information to the surface ow	cknowledge that, because I have not provided this information, the vner(s). To miligate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form.		
ff 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 1 will be returned.		
hereby certify that the statements made herein are true and correct to			
Date:	Vice President - Operations Title:		