District

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

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: Oil Lease: No. of Oil Wells _ Effective Date of Transfer: Gas Lease: No. of Gas Wells 227844 KS Dept of Revenue Lease No .: Gas Gathering System: Lease Name: Olson, Myrtle F Saltwater Disposal Well - Permit No.: ____ -____NE_ NW_sec. 14 Twp. 28S R. 16E VE W __ feet from N / S Line Legal Description of Lease: NE NW feet from E / W Line Enhanced Recovery Project Permit No .: _ Entire Project: Yes No Wilson 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.: ___1520526597 feet from N / S Line of Section (API No if Drill Pit, WO or Haul) / W Line of Section Emergency Settling Haul-Off Workover Drilling Stephen Moriarty Past Operator's License No. Contact Person: Phone: 405-600-7704 Postrock Midcontinent Production LLC Past Operator's Name & Address: 210 Park Ave, Okla. City, OK 73102 Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod Signature: Contact Person: Jim Allen New Operator's License No. -KCC WICHITA New Operator's Name & Address: River Rock Operating, LLC Phone 405-606-7481 211 N. Robinson, Suite 200 **BP Energy Company** Oil / Gas Purchaser: Oklahoma City, OK 73102 Vice President - Operations Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #___1520526597 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: permitted by No.: _ Authorized Signature FPR 10-11-16 DISTRICT PRODUCTION Mail to: Past Operator

Side Two

Must Be Filed For All Wells

* Lease Name: Olson, Myrtle F			* Location:	* Location: NE NW 14-28S-16E		
Well No.	API No (YR DRLD/PRE '67)	Footage from Section (i.e. FSL = Feet from So		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
14-1	1520526597 🗸	743 FNL 1985 FW	'L	Gas	Producing	
MILES CONTRACTOR OF THE PARTY O		FSL/FNL	FEL/FWL	***************************************	-	
		FSL/FNL	FEL/FWL	:		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL .			
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL _		KCC WICHI	
		FSL/FNL	FEL/FWL		JUL 27 2016	
		FSL/FNL	FEL/FWL		RECEIVE	
		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 (Calhodic Protection Borehole Inteni) 🗷 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: Olson, Myrtle F Well #. 14-1		
City: Oklahoma City State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: Jim Allen	the lease below:		
Phone: (405) 606-7481 Fax: (405) 606-7483	- STIFF ANAI		
Phone: (405) 606-7481 Fax: (405) 606-7483 Email Address: jim.allen@riverrockoperating.com KCC W	CHILIFUM		
Lincal Address.	2016		
JUL 27			
Surface Owner Information:	EIVED		
Name. Marping Ziamo, modalin, randy, olden, com	when hilling 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		
Address 1: 17421 US HWY 75			
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: ALTOONA State: KS zip: 66710 +			
	lic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
CP-1 that I am filing in connection with this form; 2) if the form be form; 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	ner(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		
KCC will be required to send this information to the surface owr task, I acknowledge that I must provide the name and address of	ner(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		
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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 If choosing the second option, submit payment of the \$30.00 handling fee.	ner(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. The with this form. If the fee is not received with this form, the KSONA-1		
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