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:	INTEG WITH THIS TOPM.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 06/22/16 KS Dept of Revenue Lease No.: 232076 Lease Name: Madron, Ronald L SW- NE - NE - NW Sec. 26 Twp. 34S R. 17E W Legal Description of Lease: E2 NW County: Labette Production Zone(s): Unknown		
Gas Lease: No. of Gas Wells**			
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from E / W Line			
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No			
Number of Injection Wells**			
Field Name: CHEROKEE BASIN COAL AREA			
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.: 1509924410	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 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	7/12/16		
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Signature: Trooter		
35341	Contact Person:Jim Allen		
New Operator's License No.			
New Operator's Name & Address: River Rock Operating, LLC	Phone: 405-606-7481 St. Con Purchases BP Energy Company		
211 N. Robinson, Suite 200			
Oklahoma City, OK 73102	Date: 7/11/16 JUL 27 2016		
Title: Vice President - Operations	Signature: RECEIVED		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #1509924410has been		
	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		
Permit No.: Recommended action:	permitted by No.:		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR	PRODUCTION 9-2010 UICSEP 20 20 10		
Mail to: Past Operator New Opera	tor District		

Side Two

Must Be Filed For All Wells

* Lease Name: Madron, Ronald L			* Location:S	* Location: SW NE NE NW 26-34S-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)	
26-2	1509924410	656 FNL 1981 F\	VL	Gas	Producing	
		FSL/FNL	FEL/FWL	***************************************	***************************************	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	<u> </u>	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	-	-	
		FSL/FNL	FEL/FWL			
	***************************************	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		a n viceno	
		FSL/FNL	FEL/FWL		JUL 27 2016	
		FSL/FNL	FEL/FWL		JUL 27 2016	
		FSL/FNL	FEL/FWL		RECEIVED	
		FSL/FNL	FEL/FWL			
			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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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 (C	Calhodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 35341	Well Location:		
Name: River Rock Operating, LLC	SW-NE-NE-NW Sec. 26 Twp. 34S S. R. 17E X East West		
Address 1: 211 North Robinson	County: Labette		
Address 2: Suite 200	Lease Name: Madron, Ronald L Well #: 26-2		
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:		
Contact Person: Jim Allen Phone: (405) 606-7481 Fax: (405) 606-7483 Email Address: jim.allen@riverrockoperating.com	E2 NW		
Email Address: jim.allen@riverrockoperating.com	4111		
CCMIC	anth		
Surface Owner Information:			
Name: MADRON REV TR, RONALD L	EWhen filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface		
Address 2: 198 5000 RD	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.		
City: COFFEYVILLE State: KS Zip: 67337 +			
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	batteries, pipelines, and electrical lines. The locations shown on the plat		
Select one of the following:			
	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 own	eknowledge that, because I have not provided this information, the 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.		
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			
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.		
Date: 7/18/16 Signature of Operator or Agent:	Vice President - Operations Title:		