### 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:	itted with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 06/22/16		
Gas Lease: No. of Gas Wells **	KS Dept of Revenue Lease No.: 222373		
Gas Gathering System:	Lease Name: Wolf		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: S2 NW SW		
Enhanced Recovery Project Permit No :			
Entire Project: Yes No	County: Wilson		
Number of Injection Wells **	Production Zone(s):		
Field Name: Fredonia			
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:1520525217	feet from N / S Line of Section		
	feet from E / W Line of Section		
(API No if Drill Pit, WO or Haul)  Ryce of Pit: Emergency Burn Settling			
Type of the Emergency Burn Setting			
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	Date: 7/8/16 Signature: Tuske		
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Turke		
Title:	Signature:		
New Operator's License No. 35341	Contact Person: Jim Allen		
New Operator's Name & Address: River Rock Operating, LLC	Phone: 405-606-7481 KCC WICHITA		
211 N. Robinson, Suite 200	Oil / Gas Purchaser: BP Energy Company		
Oklahoma City, OK 73102	7/0/16 A JUL 2/ 2010		
	Date: 1/8/16 RECEIVED		
Title: Vice President - Operations	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #1520525217 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		
Permit No.: Recommended action:	permitted by No.:		
Date:	Date:		
Authorized Signature	Authorized Signature		
	PRODUCTION (04070 0CT 1 0 2016		
Mail to: Past Operator New Operat	or District		

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease No.: 222373					
* Lease Name: _	Wolf	* Location:	*Location: S2 NW SW 12-29S-15E		
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)	
3	1520525217 🗸	1675 FSL 618 FWL	Gas	Producing	
-		FSL/FNLFEL/FW	L	•	
		FSL/FNLFEL/FW	L -		
		FSL/FNLFEL/FW	L		
		FSL/FNLFEL/FW	L		
		FSL/FNL FEL/FW	L		
		FSL/FNLFEL/FW	L		
		FSL/FNLFEL/FW	L		
		FSL/FNL FEL/FW	L		
		FSL/FNLFEL/FW	L		
		FSL/FNLFEL/FW	L	-	
<del></del>		FSL/FNL FEL/FW	L		
		FSL/FNLFEL/FW	L		
		FSL/FNL FEL/FW	L 3444		
		FSL/FNL FEL/FW	L		
		FSL/FNLFEL/FW	L ,		
		FSL/FNLFEL/FW	L		
		FSL/FNLFEL/FW	L	- KCC WICHITA	
		FSL/FNLFEL/FW	L	JUL 2 7 2016	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		FSL/FNLFEL/FW		RECEIVED	
		FSL/FNLFEL/FW			
		FSL/FNLFEL/FW	L		
		FSL/FNLFEL/FW	L		
		FSL/FNLFEL/FW	L		

A separate sheet may be attached if necessary

<sup>\*</sup> 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 (C	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 35341	Well Location:		
Name: River Rock Operating, LLC			
Name: River Rock Operating, LLC Address 1: 211 North Robinson	County: Wilson		
Address 2: Suite 200	Lease Name: Wolf Well #: 3		
City: Oklahoma City State: OK Zip: 73102 +	If filling 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 the lease below:  Shone: ( 405 ) 606-7481 Fax: ( 405 ) 606-7483 S2 NW SW			
Email Address: jim.allen@riverrockoperating.com  KCC WICHT			
KCC MICL			
Surface Owner Information:  Name: Wold, Ted L & Donna  JUL 2 7 2016			
Name: Wold, Ted L & Donna  When filing a Form T-1 involving multiple surface owners, attach a			
Address 2:	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 2:	county, and in the real estate property tax records of the county treasurer.		
City: Fredonia State: KS Zip: 66736 +			
	dic 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.		
Select one of the following:			
	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 rner(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 CCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handling	fee with this form. If the fee is not received with this form, the KSONA-1		
form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	1 WIII De returned.		
I havely extilled the statements made have a section and the	the best of my knowledge and belief		
I hereby certify that the statements made herein are true and correct to	1 7 1		
Date: 7/8/16 Signature of Operator or Agent:	Vice President - Operations Title:		