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 subm	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.: 229652		
Gas Gathering System:	Lease Name: Mih, A D		
Saltwater Disposal Well - Permit No.:	N2 _ NW. SE_sec. 3 _ Twp. 27S_R. 19E_ VE W		
Spot Location: feet from N / S Line			
feet from L E / W Line	Legal Description of Lease: N2 NW SE		
Enhanced Recovery Project Permit No :			
Entire Project: Yes No	County: Neosho		
Number of Injection Wells**	Production Zone(s): Multiple		
Field Name: CHEROKEE BASIN COAL AREA	Injection Zone(s):		
** Side Two Must Be Completed.			
Surface Pit Permit No.: 1513327062	feet from N / S Line of Section		
API No. il Drili 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 No33343	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:		
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Signature: My T/Justee		
New Operator's License No35341 ✓	Contact Person: Jim Allen		
	Phone: 405-606-7481 KCC WICHITA		
New Operator's Name & Address: River Rock Operating, LLC 211 N. Robinson, Suite 200	Phone: 100 000 1101		
	Oil / Gas Purchaser: BP Energy JUL 2 7 2016		
Oklahoma City, OK 73102	Date: 7/14/16 RECEIVED		
Title: Vice President - Operations	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit #1513327062has been		
noted, approved and duly recorded in the records of the Kansas Corporation C			
Commission records only and does not convey any ownership interest in the a	bove 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		
	RODUCTION V V V V V V V V V V V V V V V V V V V		
Mail to: Past Operator New Operator	District		

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 229652 * Lease Name: Mih, A D			*Location: N2 NW SE 3-27S-19E				
Lease Name:	1,111,112		Location:				
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		
3-3	1513327062 🗸	2316 FSL 2001 FEL		Gas	Producing		
				MACON 1			
		FSL/FNL	FEL/FWL		1		
		FSL/FNL	FEL/FWL		***************************************		
		FSL/FNL	FEL/FWL .				
		FSL/FNL	FEL/FWL _				
		FSL/FNL	FEL/FWL				
							
		FSL/FNL	FEL/FWL _		WARRANCE CO. C.		
			FEL/FWL		ICHITA		
		FSL/FNL	FEL/FWL	YCC W			
		FSUFNL	FEL/FWL	0 - 2-0000 - 000 0	EIVED		
		FSL/FNL	FEL/FWL _	1 2200			
-		FSL/FNL	FEL/FWL _				
		FSL/FNL	FEL/FWL _		· · · · · · · · · · · · · · · · · · ·		

A separate sheet may be attached if necessary

The 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

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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	(Cathodic Protection Borehole Intent) 🗵 T-1 (Transfer) 🔲 CP-1 (Plugging Application)			
OPERATOR: License # 35341	Well Location:			
Name: River Rock Operating, LLC				
Address 1: 211 North Robinson	County Neosho			
Address 2: Suite 200	Lease Name: Mih, A D Well #; 3-3			
Oklahama City OK 73103				
City: Oklahoma City State: OK Zip: 73102 +				
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: Fax: (405) 606-7483 Ckoperating.com CC VICENED LAVON			
Email Address: jim.allen@riverrockoperating.com	HIL			
Email Aduless. Jim.aliancemorrating.com	2016			
111/21				
Surface Owner Information:	EIVED			
Name: HEILMAN NEAL E & G LAVON When filing a Form T-1 involving multiple surface owners, attac				
Address 1: C/o MIH ALEXANDER DAVID	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: 1927 BREWSTER RD	county, and in the real estate property tax records of the county treasurer.			
City: INDIANAPOLIS State: IN Zip: 46260 +				
the KCC with a plat showing the predicted locations of lease roads, tan are preliminary non-binding estimates. The locations may be entered of	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.			
owner(s) of the land upon which the subject well is or will be I	Act (House Bill 2032), I have provided the following to the surface 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 and email address.			
	vner(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			
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-	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	the best of my knowledge and belief			
	Vice President - Operations			
Date: 7/19/16 Signature of Operator or Agent:	Title:			