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: MUST be subm	oitted 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.: 223934
Gas Gathering System:	Lease Name: McKinsey, Edward 9-1
Saltwater Disposal Well - Permit No.:	/
Spot Location: feet from N / S Line	<u>SW</u> - <u>NE</u> - <u>SE</u> - <u>NE</u> <u>Sec</u> <u>9</u> Twp. <u>29S</u> R. <u>18E</u> ✓ E ─ W
feet from E / W Line	Legal Description of Lease: SW NE SE NE §9-T29S-R18E
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Neosho
Number of Injection Wells **	Production Zone(s): MISSISSIPPI
Field Name: CHEROKEE BASIN COAL AREA	Injection Zone(s):
** Side Two Must Be Completed.	
Surface Pit Permit No.: 1513325732	
(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
Type of Pit: Emergency Burn Settling	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	Date: 7/13/14
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	11 11 1
27/02	Signature:
New Operator's License No. 35341	Contact Person: Jim Allen
New Operator's Name & Address: River Rock Operating, LLC	405 COC 7404
211 N. Robinson, Suite 200	Phone: 405-606-7481 KCC WICHITA
Oklahoma City, OK 73102	Oil / Gas Purchaser: _BP Ellergy Company
	Date: 7/12/16 JUL 2 7 2016
Title: Vice President - Operations	Signature: RECEIVED
	7
Acknowledgment of Transfer: The above request for transfer of injection a	
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 a	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:
DIOTRIOT	Authorized Signature
Mail to: Past Operator New Operator	RODUCTION 12-13-16 UID EC 13 20 19

Must Be Filed For All Wells

* Lease Name:	McKinsey, Edward 9-1		* Location:	SW NE SE NE 9-295	S-18E
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
9-1	1513325732 🗸	1878 FNL 487 F	EL	Gas	Producing
		FSL/FNL _	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL			

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***************************************		FSL/FNL			
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL		
······································		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		KCC WICHITA
***************************************		FSL/FNL	FEL/FWL _		111 2 7 2016
***************************************		FSL/FNL	FEL/FWL _		HECEIVED
		FSL/FNL			8 600

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 (C	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 35341	Malliane
Name: River Rock Operating, LLC	Well Location:
Address 1: 211 North Robinson	SW-NE-SE-NE Sec. 9 Twp. 29S S. R. 18E ■ East West County: Neosho
Address 2: Suite 200	•
City: Oklahoma City State: OK Zip: 73102 +	Lease Name: McKinsey, Edward 9-1 Well #: 9-1
Contact Person: Jim Allen	If filling a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:
40E 000 7404 40E	OWALE OF ME OF THE O
Email Address: jim.allen@riverrockoperating.com	TE
Phone: (405) 606-7481 Fax: (405) 606-7483	When 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 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.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodi the KCC with a plat showing the predicted locations of lease roads, tank I are preliminary non-binding estimates. The locations may be entered on Select one of the following:	
I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loc 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, and	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner 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	er(s). To mitigate the additional cost of the KCC performing this
if choosing the second option, submit payment of the \$30.00 handling fe- form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 v	e with this form. If the fee is not received with this form, the KSONA-1 will be returned.
baraby and its that the state	
hereby certify that the statements made herein are true and correct to the	ne best of my knowledge and belief.
Date: 7/19/16 Signature of Operator or Agent:	Vice President - Operations Title: