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: Effective Date of Transfer: 06/22/16 Oil Lease: No. of Oil Wells _ Gas Lease: No. of Gas Wells _ 1 229677 -KS Dept of Revenue Lease No .: Gas Gathering System: Lease Name: Barriger, Eldon W Saltwater Disposal Well - Permit No.: _ NW. SE. NW. NW Sec. 26 Twp. 27S R 19E W feet from N / S Line Legal Description of Lease: NW NW feet from E / W Line Enhanced Recovery Project Permit No.: _ Neosho Entire Project: Yes No County: 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.: ___ 1513327113 feet from N / S Line of Section (API No if Drill Pit, WO or Haul) feet from W Line of Section Type of Pit: Emergency Settling Haul-Off Workover Drilling Contact Person: Stephen Moriarty Past Operator's License No. Postrock Midcontinent Production LLC Phone: _405-600-7704 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. Phone: 405-606-7481 River Rock Operating, LLC New Operator's Name & Address: KCC WICHITA 211 N. Robinson, Suite 200 Oil / Gas Purchaser: _ BP Energy Oklahoma City, OK 73102 7/18/16 Date: Vice President - Operations Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #___1513327113 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 2010 DISTRICT --PRODUCTION Mail to: Past Operator New Operator, District

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 229677	The state of the s			
* Lease Name:_	Barriger, Eldon W		* Location:_N	W SE NW NW 26-275	S-19E
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)
26-1	1513327113-00-01	796 FNL 667 FWL		Gas	Producing
		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		CC WICHITA
		FSL/FNL	FEL/FWL	(1)	IUL 2 7 2016
			FEL/FWL		RECEIVED
			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.

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 (Ca	alhodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 35341	Well Location.		
Name: River Rock Operating, LLC	NW-SE-NW-NW Sec. 26 Twp. 27S S. R. 19E X East West		
Address 1: 211 North Robinson	County Neosho		
Address 2: Suite 200	Lease Name: Barriger, Eldon W Well #: 26-1		
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:		
405 000 7404 405 000 7400	NW NW		
Email Address: jim.allen@riverrockoperating.com	>		
allChar			
## Phone: (405) 606-7481 Fax: (405) 606-7483 Email Address:iim.allen@riverrockoperating.com **Surface Owner Information:** Name:BARRIGER ELDON SR & SONYA	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:	batteries, pipelines, and electrical lines. The locations shown on the plat		
I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loce 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 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	knowledge 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	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
I hereby certify that the statements made herein are true and correct to the	he best of my knowledge and belief.		
Date: 7/19/16 Signature of Operator or Agent:	Vice President - Operations Title:		