## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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:			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 6 22 16		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 228366		
Gas Gathering System:	Lease Name: ECKERT, GARRY O 20-1		
Saltwater Disposal Well - Permit No.:	<u>SW _ NW Sec. 20 Twp. 31 R. 19</u> E W		
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: SW NW		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Labette		
Number of Injection Wells**	Production Zone(s):_CHEROKEE COALS		
Field Name: Cherokee Basin Coal Area	Injection Zone(s):		
** Side Two Must Be Completed.	.,		
15-099-24109	1980 feet from VN / S Line of Section		
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	660 feet from E / W Line of Section		
Type of Pit: Fmergency Burn Settling	Haul-Off Workover Drilling		
пуро от так —	<u> </u>		
Past Operator's License No. 33343 ✓	Contact Person: Stephen Moriarty		
Past Operator's Name & Address: Postrock Midcontinent Production	Phone: 405-600-7704		
LLC, 210 Park Avenue, Suite 2750, OKC, OK 73102	Date:		
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Production	Signature: 1/25 fed		
New Operator's License No35341 ✓	Contact Person: Jim Allen		
New Operator's Name & Address: River Rock Operating, LLC	Phone: 405-606-7481 KCC WICHITA		
New Operator's Name & Address:	Oil / Gas Purchaser: B.P. Energy Company JUL 27 2016		
	7 O U PECEIVED		
Oklahoma City, OK 73102	Date: 1816		
Title: Vice president Operations	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #15-099-24109has 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			
Commission records only and economic year,			
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 (C) UNIO V 1. 2001		
Mail to: Past Operator New Operat	or District		

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	No.: 228366					
Lease Name:	ECKERT, GARRY O 20-1		* Location: SW NW SEC 20-31S-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)	
20-1	15-099-24109	Circle 1980FNL FSL/FNL	660FWL FEL/FWL	Gas	Producing	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
			FEL/FWL			
	·		FEL/FWL		_	
		FSL/FNL	FEL/FWL			
			FEL/FWL			
		FSL/FNL	FEL/FWL			
			FEL/FWL			
			FEL/FWL			
			FEL/FWL			
****						
			FEL/FWL		KCC WICHITA	
			FEL/FWL		JUL 27 2016	
			FEL/FWL		RECEIVED	
		FSL/FNL	FEL/FWL			

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
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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	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
35341			
OPERATOR: License # 35341  Name: River Rock Operating , LLC	Well Location:		
Address 1: 211 N. Robinson			
Address 2: Suite 200	County: Labette  Lease Name: ECKERT, GARRY O Well #: 20-1		
City: Oklahoma City State: OK Zip: 73102 +			
Contact Person: Jim Allen	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: ( 405 ) 606-7481 Fax: ( 405 ) 606-7483 KCC V	VICHITA		
Email Address:	Alough		
JUL 1	2 7 2016		
	CEIVED		
Name: GARRY O ECKERT & MARY E. L. ECKERT			
Address 1: 1421 BELMONT AVENUE	<ul> <li>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.</li> </ul>		
Address 2:			
City: 771100110 State: 110 Zip: 07007 +			
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 Select one of the following:	batteries, pipelines, and electrical lines. The locations shown on the plat		
CP-1 that I am filing in connection with this form; 2) if the form b form; and 3) my operator name, address, phone number, fax, an  I have not provided this information to the surface owner(s). I ac	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		
task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the Ki	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-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 to Date: 7   11   16   Signature of Operator or Agent:	Title: V-Pres Operations		