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 submit	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.: 229266
Gas Gathering System:	Lease Name: LDH Farms
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	W2. SE. NW Sec. 33 Twp. 29S R. 18E VE W
feet from E / W Line	Legal Description of Lease: W2 SE NW
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Neosho
Number of Injection Wells **	
Field Name: CHEROKEE BASIN COAL AREA	Production Zone(s): Multiple
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.: 1513326962 (API No. it Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from N / S Line of Section feet from E / W Line of Section 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	71.6/16
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Date: Signature: TVsJer
New Operator's License No. 35341	Contact Person: Jim Allen
New Operator's Name & Address: River Rock Operating, LLC	
211 N. Robinson, Suite 200	ACC MICH
Oklahoma City, OK 73102	7/14/16
Title: Vice President - Operations	Signature: RECEIVER
Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation
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 12-19-14 Dute 19 20 10
Mail to: Past Operator New Operato	orDistrict

Side Two

Must Be Filed For All Wells

* Lease Name: _	LDH Farms		Location:	W2 SE NW 33-29S-18E	
Well No.	API No. (YR DRLD/PRE '67)	Footage from Se (i.e. FSL = Feet from	ction Line	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
33-4	1513326962 🗸	1983 FNL 1701	FWL	Gas	Producing
		FSL/FNL _	FEL/FWL		-
		FSL/FNL	FEL/FWL		
-		FSL/FNL	FEL/FWL		
-					
		FSL/FNL			
					-

		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _		KCC WICHIT
		FSL/FNL	FEL/FWL		1111 / 1 20
		FSL/FNL	FEL/FWL		RECEIVE
***************************************		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _		
		FSL/FNL	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.

OPERATOR: License # 35341	
Name: River Rock Operating, LLC	Well Location:
Address 1: 211 North Robinson	
Address 2: Suite 200	County: Neosho
o: Oklahoma City OK 73403	Lease Name: LDH Farms Well #: 33-4
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	W2 SE NW
Email Address: jim.allen@riverrockoperating.com	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: W2 SE NW CHITA W2 SE NW 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 owners. Surface
"CCAA	2016
Surface Owner Information:	ECEVED 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
Name: LDH FARMS LLC	When filing a Form T-1 involving multiple surface owners, attach an additiona
Address 1: C/O LDH FARMS MANAGEMENT INC	
Address 2: PO BOX 188	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.
City: BUFFALO State: KS Zip: 66717 +	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cat	thodic Protection Borehole Intent), you must supply the surface owners and
The state of the predicted locations of lease mans in	ank nationed ninglings and electrical lines. The leastings in
Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	e Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form mediated: 2 Form C-1 or Form CB-1, the plated by the first of the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form mediated by a Form C-1 or Form CB-1, the plated by acquired by the surface of t
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, fax I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface.	e Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this , and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this is soft the surface owner by filling out the top section of this form and
Are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addres that I am being charged a \$30.00 handling fee, payable to the choosing the second option, submit payment of the \$30.00 handling	Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form meeting filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this less of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.
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