### 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.: 229899			
Gas Gathering System:	Lease Name: Rensing, Lloyd E			
Saltwater Disposal Well - Permit No.:	SE - NW. NE - SW Sec. 19 Twp. 27S R 19E VE W			
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease: SW			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County: Neosho			
Number of Injection Wells **	Production Zone(s): Cherokee Coals			
Field Name: CHEROKEE BASIN COAL AREA	Injection Zone(s):			
** Side Two Must Be Completed.	illjection Zone(s).			
Surface Pit Permit No.: 1513327111	feet from N / S Line of Section			
(API No 11 Drill Pit, WO or Haul)	feet from F / 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	1/20/11			
Title: Stephen Moriarly, Bankruptcy Trustee for Postrock Midcontinent Prod	Signature:			
New Operator's License No. 35341 /	Contact Person: Jim Allen KCC WICH			
New Operator's Name & Address: River Rock Operating, LLC	Phone: 405-606-7481			
1 N. Robinson, Suite 200  Oil / Gas Purchaser: BP Energy  Date: 7/18/16				
Title: Vice President - Operations	Signature:			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #1513327111 has 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	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:	Date:			
	PRODUCTION 11-15-16 UIC 15 2016			
Mail to: Past Operator New Operat	Laborate to the second of			

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease I	No.: 229899	- 10				
* Lease Name:_	Rensing, Lloyd E	* Location: SE NW NE SW 19-27S-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)	
19-2	1513327111	2029 FSL 1700 FWL		Gas	Producing	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	SMANNAGA	-	
A		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL			
<del></del>		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		CC WICHITA	
		FSL/FNL	FEL/FWL		INT 51 5010	
		FSL/FNL	FEL/FWL		RECEIVED	
		FSL/FNL	FEL/FWL		•	
		FSL/FNL	FEL/FWL	VALUE OF THE PARTY		
		FSL/FNL	FEL/FWL		- 8	
		FSL/FNL	FEL/FWL	3		
		FSL/FNL	FEL/FWL	<u> </u>		
		FSL/FNL	FEL/FWL		-	
*		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	-		
		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.

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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 (Inlen!) CB-1 (C	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)				
OPERATOR: License # 35341	Well Location:				
Name: River Rock Operating, LLC	SE-NW-NE-SW Sec. 19 Twp. 27S S. R. 19E X East West				
Address 1: 211 North Robinson	County Neosho				
Address 2: Suite 200	Lease Name: Rensing, Lloyd E Well #: 19-2				
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:				
	SW				
Email Address:jim.allen@riverrockoperating.com	SP.				
Establish Address: Jim. alientest vertockoperating.com					
Phone: ( 405 ) 606-7481	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 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Select one of the following:					
	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 ow	sknowledge 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 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	fee 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 best of my knowledge and belief.				
Date: 7/19/16 Signature of Operator or Agent:	Vice President - Operations Title:				