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:	nued with this form.			
Oil Lease: No. of Oil Wells	Effective Date of Transfer: 06/22/16 KS Dept of Revenue Lease No.: 229400 Lease Name: Greve, Merle D NW. SE - SW. SE Sec. 8 Twp. 27S R. 19E VE W			
Gas Lease: No. of Gas Wells				
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location:feet from N / S Line				
feet from L E / W Line	Legal Description of Lease: SW SE			
Enhanced Recovery Project Permit No :				
Entire Project: Yes No	County: Neosho			
Number of Injection Wells**	Production Zone(s): Multiple			
Field Name: CHEROKEE BASIN COAL AREA	Injection Zone(s):			
** Side Two Must Be Completed.				
Surface Pit Permit No.:1513326821	feet from N / S Line of Section			
(API No 11 Drill Pit, WO or Haul)	feet from FE / 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: 7/15/14 Signature: Trus ter			
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Signature: / // // // // Signature:			
New Operator's License No35341 🗸	Contact Person: Jim Allen			
New Operator's Name & Address: _River Rock Operating, LLC	Phone: 405-606-7481 KCC WICHIT			
211 N. Robinson, Suite 200	Oil / Gas Purchaser; BP Energy / III 2 7 2016			
Oklahoma City, OK 73102	7/14/16			
	Date: RECEIVED			
Title: Vice President - Operations	Signature			
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit #1513326821 has been			
noted, approved and duly recorded in the records of the Kansas Corporation C				
Commission records only and does not convey any ownership interest in the a	*			
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			
DISTRICT P Mail to: Past Operator New Operator	PRODUCTION UICTON District			
ivew Operator	District			

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 229400	100000000000000000000000000000000000000			
* Lease Name: Greve, Merle D		* Location:SW SE 8-27S-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)
8-1	1513326821	644 FSL 1964 F	EL	Gas	Producing
		FSL/FNL	FEL/FWL		
8 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1	***************************************	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	Account of the second of the s	=
		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	ANALYSIS (1997)	N
		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 .		KCC WICHITA
9		FSL/FNL	FEL/FWL		JUL 2 7 2016
					RECEIVED
		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.

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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 (Calhodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 35341	Well Location:
Name: River Rock Operating, LLC	NW-SE - SW-SE Sec. 8 Twp. 27S S. R. 19E ▼ East West
Name: River Rock Operating, LLC Address 1: 211 North Robinson	County Neosho
Address 2: Suite 200	Lease Name: Greve, Merle D Well # 8-1
City: Oklahoma City State: OK Zip. 73102	
Contact Person: Jim Allen	the lease below:
Contact Person: Jim Allen Phone: (405) 606-7481 Fax: (405) 606-7483	SW SE
Email Address: jim.allen@riverrockoperating.com	ATIA
Email Address:jim.allen@riverrockoperating.com Surface Owner Information: Name: _GREVE MERLE & NANCY Address 1:	2016 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.
the KCC with a plat showing the predicted locations of lease roads, tal	odic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
Select one of the following:	
owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
KCC will be required to send this information to the surface o	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this s of the surface owner by filling out the top section of this form and KCC, 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	g fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.
I hereby certify that the statements made herein are true and concept to	/
Date: 7/19/16 Signature of Operator or Agent:	Vice President - Operations Title: