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:			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 06/22/16		
Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 228373		
Gas Gathering System:	Lease Name: Phillips, Dale R		
Saltwater Disposal Well - Permit No.:	SW. NE. SW. SE Sec. 7 Twp. 31S R. 18E ▼E W		
Spot Location:feet from N / S Line			
feet from E / W Line	Legal Description of Lease: SE		
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.	Injection Zone(s).		
Surface Pit Permit No.:1509924035	feet from N / S Line of Section		
(API No. ii Drill Pit, WO or Haul)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling		
Type of Pit: Emergency Burn Settling			
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: 7/53/16		
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	he Tontee		
Title: Otephen World, Danishproy House N. Technology	Signature:		
New Operator's License No. 35341	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 Company / JUL 27 2016		
Oklahoma City, OK 73102	Date: 7/11/16 RECEIVED		
Title: Vice President - Operations			
Title: Ti	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #1509924035 has been		
	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the			
	T		
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 EPR /2/5/16	PRODUCTION 12-6-2016 UIDEC 06 ZUTU		
Mail to: Past Operator New Operat	or District		

Side Two

Must Be Filed For All Wells

Lease Name: Phillips, Dale R			*Location: SW NE SW SE 7-31S-18E			
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)	
7-8	1509924035	804 FSL 1977 FEL		Gas	Producing	
	<u></u>	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			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
			FEL/FWL			
			FEL/FWL	KCC	WICHITA	
			FEL/FWL	JUL	27 2016	
			FEL/FWL	R	ECEIVED	
		FSL/FNL				

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	(Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 35341	Well Location:		
Name: River Rock Operating, LLC			
Address 1: 211 North Robinson	County Labette		
Address 2: Suite 200	Lease Name: Phillips, Dale R Well #: 7-8		
City: Oklahoma City State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
	the state of the state of		
Contact Person: Jim Allen Phone: (405) 606-7481 Fax: (405) 606-7483 Email Address: jim.allen@riverrockoperating.com Surface Owner Information: Name: PHILLIPS REV T, RALPH DALE	SE		
Email Address: jim.allen@riverrockoperating.com	HIIL		
KCC AA1	anth		
27	7010		
Surface Owner Information:	EIVED		
the state of the s			
Address 1: PHILLIPS R/T. LILLIE IRENE	owner information can be found in the records of the register of deeds for the		
Address 2: 25084 DOUGLAS RD	county, and in the real estate property tax records of the county treasurer.		
City: DENNIS State: KS Zip: 67341 +			
	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.		
I certify that, pursuant to the Kansas Surface Owner Notice 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 of	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handlin form and the associated Form C-1, Form CB-1, Form T-1, or Form CI	ng fee with this form. If the fee is not received with this form, the KSONA-1P-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: 7/18/16 Signature of Operator or Agent:	Vice President - Operations		
Signalia of operator of rigoria	7		