District 3

## 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: Effective Date of Transfer: \_\_June 22, 2016 Oil Lease: No. of Oil Wells \_ Gas Lease: No. of Gas Wells \_ KS Dept of Revenue Lease No.: . Gas Gathering System:\_ Lease Name: Ingels 35-1 SWD D28969 v Saltwater Disposal Well - Permit No.: \_\_\_ Spot Location: 204 \_ feet from ☐ N / 🗸 S Line Legal Description of Lease: NE & SE §34-26S-19EP AND 130 feet from E / ✓ W Line W/2 SW §35-26S-19EP \ Enhanced Recovery Project Permit No.: \_ County: ALLEN Entire Project: Yes No Number of Injection Wells. Production Zone(s): Field Name: HUMBOLDT-CHANUTE ARBUCKLE 🗸 Injection Zone(s):\_ \*\* Side Two Must Be Completed. 15-00129615 Surface Pit Permit No.: feet from N / S Line of Section (API No. if Drill Pit. WO or Haul) W Line of Section feet from Burn Settling Haul-Off Workover Drilling Type of Pit: Emergency Stephen Moriarty 33343 Past Operator's License No. Contact Person: \_ Past Operator's Name & Address: Postrock Midcontinent Phone: 405-600-7704 Production LLC, 210 Park Ave, Ste 2750, OKC, OK 73102 Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Production Signature: KCC WICHITA Contact Person: Jim Allen New Operator's License No. JUL 27 2016 New Operator's Name & Address: River Rock Operating, LLC Phone: <u>4</u>05-606-7481 RECEIVED 211 N. Robinson, Suite 200 Oil / Gas Purchaser: Date: June 30, 2016 Oklahoma City, OK 73102 Title: Vice-President Operations 15-00129615 Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 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 \_ . Recommended action: <u>Noいと</u> permitted by No.: \_\_\_ Authorized Signature DISTRICT

Mail to: Past Operator

**New Operator** 

#### Side Two

### Must Be Filed For All Wells

KDOR Lease	No.:	2/					
* Lease Name: Ingels 35-1 SWD			* Location: SW SW § 35-T26S-R19EP				
Well No.	API No. (YR DRLD/PRE '67)		Footage from (i.e. FSL = Feet fr	om South L	ine) مير م	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
35-1 SWD	15-00129615		Circle 204 (FSU)FNL	51 <b>5</b> 0	Circle _FEL FWL	SWD	Authorized
			FSL/FNL		FEL/FWL		Injection Well
			FSL/FNL	••••	_ FEL/FWL		
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			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 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	SW_SW_Sw_Sec. 35 _Twp. 26 _S. R. 19 _X East _ West			
Address 1: 211 North Robinson				
Address 2: Suite 200	County: Allen  Lease Name: Ingels Well #: 35-1 SWD			
City: Oklahoma City State: OK Zip. 73102				
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:			
Contact Person: Jim Allen  Phone: ( 405 ) 606-7481 Fax: ( 405 ) 606-7483	NE 0.05.004.000.4050			
iim@cardinalriver.com	NE & SE §34-26S-19EP AND			
Chian Address.	AND W/2 SW §35-26S-19EP			
KCC MICH	<del>110</del>			
Surface Owner Information:				
Name: Kenneth M. & Nina Ingels Living Trust JUL 27	When filing a Form T-1 involving multiple surface owners, attach an additional			
Address 1: 1836 Alabama Rd RECEIVE	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			
Address 2:	county, and in the real estate property tax records of the county treasurer.			
City: Humboldt State: KS Zip: 66748 +				
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered of Select one of the following:	k batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
<ul> <li>✓ I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be let 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, a</li> <li>✓ I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface owner</li> </ul>	ocated: 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.  acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this is of the surface owner by filling out the top section of this form and			
form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-				
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.			
June 30, 2016	Vice-President Operations			
Date: Signature of Operator or Agent:	Title:			