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 Compilance with the Kansas Surface Owner Notification Act,

Check Applicable Boxes: MUST be subt	mitted 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.: 227839
Gas Gathering System:	Lease Name: Grady, James A
Saltwater Disposal Well - Permit No.:	NE_ NE_sec. 7 Twp. 28S R. 17E ✓E W
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease: NE NE
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Wilson
Number of Injection Wells**	Production Zone(s): Cherokee Coals
Field Name: Cherokee Basin Coal Area	Injection Zone(s):
** Side Two Must Be Completed.	
Surface Pit Permit No.:1520526785	feet from N / S Line of Section
/API No if Drill Pit WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
, po con a la l	
Past Operator's License No. 33343	Contact Person: Stephen Monarty
Past Operator's Name & Address: Postrock Midcontinent Production LLC	Phone: 405-600-7704
210 Park Ave, Okla. City, OK 73102	
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Signature: Two tee
New Operator's License No. 35341	Contact Person: Jim Allen KCC WICHITA
New Operator's Name & Address: River Rock Operating, LLC	Phone: 405-606-7481
211 N. Robinson, Suite 200	Phone: 403-000-7401 Oil / Gas Purchaser: BP Energy Company JUL 27 2016
Oklahoma City, OK 73102	Date: 7/7/16 RECEIVED
	- \
Title: Vice President - Operations	Signature:
Acknowledgment of Transfer: The above request for transfer of inject	tion authorization, surface pit permit # 1520526785 has been
noted approved and duly recorded in the records of the Kansas Corporal	tion Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in	
is acknowledged a	as is acknowledged as
the new operator and may continue to inject fluids as authorized t	the new operator of the above named lease containing the surface pit
Permit No.: Recommended action:	
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR	PRODUCTION (C) NOV 18 70 16
Mail to: Past Operator New Op	perator District

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 227839				
* Lease Name:	Grady, James A		*Location:_N	IE NE 7-28S-17E	
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section (i.e. FSL = Feet from Soc		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
7-2	1520526785 🗸	662 FNL 733 FEL		Gas	Producing
	404	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
<u>«</u>		FSL/FNL	FEL/FWL	***************************************	
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		FSL/FNL	FEL/FWL		TA
		FSL/FNL	FEL/FWL		JUL 27 2016
			FEL/FWL		JUL 27 2016
***************************************		FSL/FNL			RECEIVED
		FSL/FNL			
		FSL/FNL			
		FOLIFINE			

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.

	Well Location:
OPERATOR: License # 35341  Name: River Rock Operating, LLC	
Address 1: 211 North Robinson	County: Wilson
Address 2: Suite 200	Lease Name: Grady, James A Well #: 7-2
City: Oklahoma City State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Jim Allen	the lease below:
Phone: (405 \ 606-7481 Fax: (405 \ 606-7483	– NE NE
Email Address: jim.allen@riverrockoperating.com	AP
Email Address: jim.allen@riverrockoperating.com  Surface Owner Information: Name: Grady, James A & Evelyn L Address 1: 22094 1800 RD  Address 2: City: CHANUTE State: KS Zip: 66720 +	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,	rank panenes, didennes, and electrical lines, The locations shown of the plat
are preliminary non-binding estimates. The locations may be entere Select one of the following:	ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notic owner(s) of the land upon which the subject well is or will	ce Act (House Bill 2032), I have provided the following to the surface be 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
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notic owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, fall I have not provided this information to the surface owner(s) KCC will be required to send this information to the surface.	ce Act (House Bill 2032), I have provided the following to the surface be 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 ix, and email address.  I acknowledge that, because I have not provided this information, the e owner(s). To mitigate the additional cost of the KCC performing this ress of the surface owner by filling out the top section of this form and
■ I certify that, pursuant to the Kansas Surface Owner Notic owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, fall 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 add that I am being charged a \$30.00 handling fee, payable to the surface of the surface owner(s).	ce Act (House Bill 2032), I have provided the following to the surface be 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 ex, and email address.  I acknowledge that, because I have not provided this information, the e owner(s). To mitigate the additional cost of the KCC performing this ress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.
<ul> <li>✓ I certify that, pursuant to the Kansas Surface Owner Notic owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, fall I have not provided this information to the surface owner(s) KCC will be required to send this information to the surfact task, I acknowledge that I must provide the name and add that I am being charged a \$30.00 handling fee, payable to the surfact task, I acknowledge that I must provide the name and add that I am being charged a \$30.00 handling fee, payable to the surfact task.</li> </ul>	ce Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form bring filed is a Form C-1 or Form CB-1, the plat(s) required by this ex, and email address.  I acknowledge that, because I have not provided this information, the e owner(s). To mitigate the additional cost of the KCC performing this ress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.  It ing fee with this form. If the fee is not received with this form, the KSONA-CP-1 will be returned.
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notic owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, fall I have not provided this information to the surface owner(s) KCC will be required to send this information to the surfact task, I acknowledge that I must provide the name and add that I am being charged a \$30.00 handling fee, payable to the surfact task.	ce Act (House Bill 2032), I have provided the following to the surface be 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 ex, and email address.  I acknowledge that, because I have not provided this information, the e owner(s). To mitigate the additional cost of the KCC performing this ress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONACP-1 will be returned.