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: 06/22/16 Oil Lease: No. of Oil Wells 231022 Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: Gas Gathering System: Lease Name: Piaszynski, James J Saltwater Disposal Well - Permit No.:_ SW. NE. NE. SE Sec. 10 Twp. 34S R. 18E VE W feet from N/ S Line Legal Description of Lease: SE feet from E / W Line Enhanced Recovery Project Permit No. Labette Entire Project: Yes No County: Number of Injection Wells _ Production Zone(s): Unknown CHEROKEE BASIN COAL AREA Injection Zone(s):_ ** Side Two Must Be Completed. Surface Pit Permit No.: ___1509924371 S Line of Section feet from N / (API No. if Drill Pit, WO or Haul) W Line of Section Drilling Haul-Off Workover Emergency Burn Settling Type of Pit: Stephen Moriarty Contact Person: Past Operator's License No. Postrock Midcontinent Production LLC 405-600-7704 Past Operator's Name & Address: 210 Park Ave, Okla. City, OK 73102 Date: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod Signature: Contact Person: Jim Allen New Operator's License No. KCC WICHITA New Operator's Name & Address: River Rock Operating, LLC Phone: 405-606-7481 Oil / Gas Purchaser: BH Energy Company JUL 27 2016 211 N. Robinson, Suite 200 7/11/16 Oklahoma City, OK 73102 RECEIVED Vice President - Operations Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #___ 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 of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by _____ Recommended action: permitted by No.: Date: Authorized Signature Authorized Signature DISTRICT -

Mail to: Past Operator

Side Two

Must Be Filed For All Wells

KDOB Lease	No.: 231022				
	Piaszynski, James J		*Location: SW NE NE SE 10-34S-18E		
Well No.	API No. (YR DRLD/PRE 67)	Footage from Section (i.e. FSL = Feet from So		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
10-1	1509924371	1982 FSL 658 FEL		Gas	Producing
	·	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		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		JUL 27 2016 RECEIVED
		F\$L/FNL	FEL/FWL		111 27 2016
<u> </u>		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL			

A separate sheet may be attached if necessary

____FSL/FNL ____FEL/FWL _

^{*} 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

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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 (Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 35341	_ Well Location:		
Name: River Rock Operating, LLC	SW-NE-NE-SE Sec. 10 Twp. 34S S. R. 18E X East West		
Address 1: 211 North Robinson	County: _Labette		
Address 2: Suite 200	Lease Name: Piaszynski, James J Well #: 10-1		
City: Oklahoma City State: OK Zip: 73102 +			
	the lease below:		
	SE		
Email Address: jim.allen@riverrockoperating.com	AITA		
Phone: (_405) 606-7481 Fax: (_405) 606-7483 Email Address: _jim.allen@riverrockoperating.com Surface Owner Information: Name: _PIASZYNSKI, JAMES J Address 1: _PIASZYNSKI, SUSANN M Address 2: _1508 COLLINS ST	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.		
City: WEBSTER CITY State: IA Zip: 50595 +	_		
the KCC with a plat showing the predicted locations of lease roads, to	thodic Protection Borehole Intent), you must supply the surface owners and ank 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.		
owner(s) of the land upon which the subject well is or will be	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this c, and email address.		
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ess of the surface owner by filling out the top section of this form and le KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handli form and the associated Form C-1, Form CB-1, Form T-1, or Form C	ing fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.		
I hereby certify that the statements made herein are true and correct	t to the best of my knowledge and belief		
Thereby sering that the statements made herein are true and confed	Vice President - Operations		
Date: 7/18/16 Signature of Operator or Agent:	Title:		