## 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: MUST be subm	oitted 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.: 226861			
Gas Gathering System:	Lease Name: Bond, Alva R			
Saltwater Disposal Well - Permit No.:	N2 - S2 - NE - SE sec. 8 Twp. 30S R. 19E			
Spot Location: feet from N / S Line	Legal Description of Lease: N2 S2 NE SE			
feet from E / W Line				
Enhanced Recovery Project Permit No.:  Entire Project: Yes No	County: Neosho			
Number of Injection Wells**				
CHEDOKEE BASIN COAL AREA	Production Zone(s): Arbuckle Dolomite			
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.: 1513326346  (API No. if Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover Drilling			
Past Operator's License No. 33343	Contact Person: Stephen Moriarty			
Past Operator's Name & Address: Postrock Midcontinent Production LLC	405-600-7704			
210 Park Ave, Okla. City, OK 73102	7/15/16			
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Date: 7/15/1/e Signature: 7/15/1/e			
New Operator's License No35341 √	Contact Person:Jim Allen			
New Operator's Name & Address: River Rock Operating, LLC	Phone: 405-606-7481			
211 N. Robinson, Suite 200	Oil / Gas Purchaser: BP Energy			
Oklahoma City, OK 73102	Date: 7/13/16 JUL 27 2016			
Title: Vice President - Operations	Signature: RECEIVED			
	n authorization, surface pit permit #1513326346 has been n Commission. This acknowledgment of transfer pertains to Kansas Corporation e 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			
Permit No.: Recommended action:	permitted by No.:			
Date:	Date:			
Authorized Signature	Authorized Signature 2 2017			
DISTRICT EPR /////	PRODUCTION JAN 12 2017 UIC AN 12 2017			
Mail to: Past Operator New Oper				

#### Must Be Filed For All Wells

	No.: 226861 V				\ <b>-</b>
Lease Name:	Bond, Alva R		* Location: N	I2 S2 NE SE 8-30S-19	<u>}</u>
Well No.	API No. (YR DRLD/PRE '67)	Footage from Sect (i.e. FSL = Feet from S		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
8-1	1513326346 1	1829 FSL 654 FI	<b>EL</b>	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		
Espiration of the second		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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	w	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL			
					RECEIVED
		FSL/FNL			

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.

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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: Neosho
Address 2: Suite 200	Lease Name: Bond, Alva R Well #: 8-1
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:
City:       Oklahoma City       State:       OK       Zip:       73102       +	N2 S2 NE SE
im allen@riverreekenerating.com	
Surface Owner Information: Name: BOND ALVA RAY SR  JUL 27	HITA
KCC AAAC	94 68
Surface Owner Information:	<i>5016</i>
Name: BOND ALVA RAY SR JUL 21	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1:RECE	When filing a Form T-1 involving multiple surface owners, attach an additional NED sheet listing all of the information to the left for each surface owner information can be found in the records of the register of deed for the county and in the real estate property by records of the county treasurer.
Address 2: 5485 KIOWA RD	county, and in the real estate property tax records of the county treasurer.
City: GALESBURG State: KS Zip: 66740 +	
the KCC with a plat showing the predicted locations of lease roads	tank hatteries, ninelines, and electrical lines. The locations shown on the plat
<ul> <li>are preliminary non-binding estimates. The locations may be enter</li> <li>Select one of the following:</li> <li>I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will</li> </ul>	red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  ice 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
are preliminary non-binding estimates. The locations may be enter  Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will	red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  ice 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 orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this
are preliminary non-binding estimates. The locations may be enter  Select one of the following:   I certify that, pursuant to the Kansas Surface Owner Not 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 f form; and 3) my operator name, address, phone number, f  I have not provided this information to the surface owner(s KCC will be required to send this information to the surface.	red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  ice 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 orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address.  ). I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this dress of the surface owner by filling out the top section of this form and
are preliminary non-binding estimates. The locations may be enter  Select one of the following:   I certify that, pursuant to the Kansas Surface Owner Not 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, form; and 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	ice 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 orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address.  1). I acknowledge that, because I have not provided this information, the se owner(s). To mitigate the additional cost of the KCC performing this dress 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 KSONA-1
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Not 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, for KCC will be required to send this information to the surface owner(sexcomillowed) that I must provide the name and additional I am being charged a \$30.00 handling fee, payable to the owner(sexcoming) the second option, submit payment of the \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form form and the associated Form C-1, Form CB-1, Form T-1, or Form the second option is the second continuation of th	ice 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 orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address.  1). I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this dress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.  1) I the fee is not received with this form, the KSONA-1 of CP-1 will be returned.
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