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	nitted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:06/22/16 KS Dept of Revenue Lease No.:227013 Lease Name:Hardin, B			
Gas Lease: No. of Gas Wells**				
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line				
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No				
Number of Injection Wells***				
Field Name: Cherokee Basin Coal Area	Injection Zone(s):			
** Side Two Must Be Completed.	injection zone(s).			
Surface Pit Permit No.:1520525665	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			
,,pe a				
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: 7/80/14			
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Signature: My Trus Lee			
New Operator's License No35341 /	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: 7/7/16 RECEIVED			
Title: Vice President - Operations	Signature:			
Acknowledgment of Transfer: The above request for transfer of injection	on authorization, surface pit permit #1520525665 has been			
noted, approved and duly recorded in the records of the Kansas Corporation	on Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the				
is acknowledged as	s 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:				
remit No necommended action	politicod by No.			
Doto	Date:			
Date:	Authorized Signature			
DISTRICT EPR/2/20/16	PRODUCTION DEC 2 1 2016 UIC 2 1 2010			
Mail to: Past Operator New Ope	erator District			

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 227013 Lease Name: Hardin, B		* Location: E2 E2 NW 27-28S-17E			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line) 1350 FNL 2274 FWL		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
27-1 1520525665 /	1520525665			Gas	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
9.5		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		
	T	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	KC	CWICHITA
		FSL/FNL	FEL/FWL		UL 2.7 2016
		FSL/FNL	FEL/FWL		RECEIVED
			FEL/FWL		
		FSL/FNL	FEL/FWL		<u></u>
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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.

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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.

OPERATOR: License # 35341	Well Location:	
Name: River Rock Operating, LLC		
Address 1: 211 North Robinson	County: Wilson	
Address 2: Suite 200	Lease Name: Hardin, B Well #: 27-1	
City: Oklahoma City State: OK 7ip. 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:	
Change 405 606-7481 Ford 405 606-7483	— E2 E2 NW	
Email Address: jim.allen@riverrockoperating.com	ATH	
Email Address:jim.allen@riverrockoperating.com Surface Owner Information: Name:Hardin, Bernard J Jr & Linda K Address 1:24371 1500 RD Address 2: City: CHANUTE	2016 ENEM hen 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.	
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated 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	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.	
KCC will be required to send this information to the surface	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 choosing 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	lling fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.	
hereby certify that the statements made herein are true and corre	ct to the Most of my knowledge and helief	
I hereby certify that the statements made herein are true and corre	ct to the pest of my knowledge and belief. Vice President - Operations	