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: Oil Lease: No. of Oil Wells** 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	Effective Date of Transfer: 06/22/16 KS Dept of Revenue Lease No.: 230206 Lease Name: Hardin, Bernard J SW SW NW_Sec. 27 _ Twp. 28S _ R. 17E E W Legal Description of Lease: SW SW NW
Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells ** Field Name: Cherokee Basin Coal Area ** Side Two Must Be Completed.	County: Wilson Production Zone(s):
Surface Pit Permit No.: 1520527326 (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 / Past Operator's Name & Address: Postrock Midcontinent Production LLC 210 Park Ave, Okla. City, OK 73102 Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod New Operator's License No. 35341 / New Operator's Name & Address: River Rock Operating, LLC 211 N. Robinson, Suite 200 Oklahoma City, OK 73102	Contact Person:Stephen Moriarty Phone: 405-600-7704 Date:
Title: Vice President - Operations Acknowledgment of Transfer: The above request for transfer of injection and the content of the Kansas Corporation of Commission records only and does not convey any ownership interest in the content of the cont	Commission. This acknowledgment of transfer pertains to Kansas Corporation
is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action:	is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.:
Date:	PRODUCTION DEC 2 1 2016 PRODUCTION DEC 2 1 2016 District

Must Be Filed For All Wells

Lease Name:	Hardin, Bernard J	* Location:SW SW NW 27-28S-17E			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
27-2	1520527326 /	2250 FNL 350 FWL		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		
		FSL/FNL	FEL/FWL		_
	T	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		KCC WICHIT
		FSL/FNL	FEL/FWL		JUL 2 7 2016
		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	7.	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.

DPERATOR: License # 35341	Well Location:		
Jame: 13761 1308 Operating, ELO			
Name: River Rock Operating, LLC Address 1: 211 North Robinson	County: Wilson		
Address 2. Suite 200	Lease Name: Hardin, Bernard J Well #: 27-2		
Contact Person: Jim Allen Chone: (405) 606-7481 Fax: (405) 606-7483	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	SW SW NW		
Email Address: jim.allen@riverrockoperating.com			
Phone: (405) 606-7481 Fax: (405) 606-7483 Email Address:jim.allen@riverrockoperating.com Surface Owner Information: Name: _Rose, Larry L & Rita M Address 1:214 N WALNUT	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: ERIE State: KS Zip: 66733 +			
are preliminary non-binding estimates. The locations may be entered Select one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice	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. The 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		
CP-1 that I am filing in connection with this form; 2) if the for form; and 3) my operator name, address, phone number, fax	rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this		
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 he KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handl form and the associated Form C-1, Form CB-1, Form T-1, or Form C	ling fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.		
If choosing the second option, submit payment of the \$30.00 handle form and the associated Form C-1, Form CB-1, Form T-1, or Form C	CP-1 will be returned.		