### SCANNED

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 1-t 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	submitted with this form.
Oil Lease: No. of Oil Wells	Effective Date of Transfer:06/22/16
✓ Gas Lease: No. of Gas Wells 1	205040
Gås Gathering System:	
Saltwater Disposal Well - Permit No.:	Lease Name: Bogner, Daniel
Spot Location:feet from N / S Line	
feet from E / W Line	Legal Description of Lease: S2 SE §26-T30S-R18E
Enhanced Recovery Project Permit No.:  Entire Project: Yes No	
Number of Injection Wells	County: Neosho
Field Name: CHEROKEE BASIN COAL AREA	Production Zone(s): MISSISSIPPI
No. of North Control State Sta	Indiana Transfer of the Control of t
** Side Two Must Be Completed.	injection Zone(s):
Surface Pit Permit No.: 1513325706  (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 No33343 /	
Past Operator's Name & Address: Postrock Midcontinent Production LL(	Contact Person: Stephen Moriarty
210 Park Ave, Okla. City, OK 73102	Phone:
	Date:
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Proc	Signature: 100 Lu
35241 /	
New Operator's License No. 35341 ✓	Contact Person: Jim Allen KCC WICHIT
New Operator's Name & Address: River Rock Operating, LLC	Phone: 405-606-7481 JUL 2.7 2016
211 N. Robinson, Suite 200	Oil / Con Bushaman RP Energy Company
Oklahoma City, OK 73102	Date: 7/12/16 RECEIVED
Title: Vice President - Operations	Signature:
	-3
Acknowledgment of Transfer: The above request for transfer of inject noted, approved and duly recorded in the records of the Kansas Corporat Commission records only and does not convey any ownership interest in	tion Commission. This acknowledgment of transfer pertains to Kansae Comparation
is acknowledged a	is acknowledged as
he new operator and may continue to inject fluids as authorized b	is acknowledged as
Permit No.: Recommended action:	remaining the surface pit
	permitted by No.:
Date:	Date:
Authorized Signature /	Authorized Signature
DISTRICT EPR///0//7 Mail to: Past Operator New One	PRODUCTION 111 17 MCAN 11 2011
New Ope	erator District

#### Side Two

#### Must Be Filed For All Wells

* Lease Name:_	Name: Bogner, Daniel *Location: S2 SE 26-30S-18E				
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
26-1	1513325706	665 FSL 1212 F	EL	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		
<del></del>		FS <i>U</i> 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		CWICHITA
		FSL/FNL	FEL/FWL		C WICH!TA
	7,000	FSL/FNL	FEL/FWL _		RECEIVED
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEUFWL _		
		FSL/FNL	FEUFWL _		

<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.

### 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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (	Cathodic Protection Borehole Intent)
OPERATOR: License # 35341	Well Location:
Name: River Rock Operating, LLC	
Address 1: 211 North Robinson	
Address 2: Suite 200	
City: Oklahoma City State: OK Zip: 73102 +	Lease Name: Bogner, Daniel 26-1 Well #: 26-1
Contact Person: Jim Allen	If tiling a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
405 606 7404 405 600 7404	93 SE 800 T000 D40E
Email Address: jim.allen@riverrockoperating.com	MA
· NICY	11
Email Address:jim.allen@riverrockoperating.com  Surface Owner Information:  Name: _BOGNER DANIEL G & TERESA D  Address 1:	EVENOR 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: GALESBURG State: KS Zip: 66740 +	or and or and country to a records of the country treasurer.
are preliminary non-binding estimates. The locations may be entered on	dic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plat 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 Notice Acowner(s) of the land upon which the subject well is or will be lo CP-1 that I am filing in connection with this form; 2) if the form b form; and 3) my operator name, address, phone number, fax, an	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this
☐ I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface own task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the Ko	ner(s). To mitigate the additional cost of the KCC performing this
If choosing the second option, submit payment of the \$30.00 handling to form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.
hereby certify that the statements made herein are true and correct <sub>t</sub> to t	the heat of our knowledge and the
Date: 7/19/16 Signature of Operator or Agent:	vice President - Operations