## 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,
MIST be submitted with this form

Check Applicable Boxes:	tted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 06/22/16  KS Dept of Revenue Lease No.: 226063  Lease Name: Goins Liv Trust 2-1  SW. NE - NE - SW Sec. 2 Twp. 29S R. 17E W			
Gas Lease: No. of Gas Wells**				
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	Legal Description of Lease: NE SW §2-T29S-R17E			
feet from E / W Line				
Enhanced Recovery Project Permit No.:	County: Neosho			
Entire Project: Yes No				
Number of Injection Wells**	Production Zone(s): Riverton Coal  Injection Zone(s):			
Field Name: CHEROKEE BASIN COAL AREA				
** Side Two Must Be Completed.	injection zone(s).			
Surface Pit Permit No.:1513326165	feet from N / S Line of Section			
(API No. if Drill Pit, WO or Haul)	feet from F / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KH			
ype on the Cartesian Carte				
Past Operator's License No33343	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: 7/13/16			
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	1 1 Tourtee			
Title: Stephen Monarty, Bankruptcy Trustee for Positock Mildcontinent Production	Signature:			
35341	Contact Person:			
New Operator's License No. 35341 J				
New Operator's Name & Address: River Rock Operating, LLC	Phone: 405-606-7481 KCC WICELIT			
211 N. Robinson, Suite 200	Oil / Gas Purchaser: BP Energy			
Oklahoma City, OK 73102	Date: 7/13/16 JUL 2 7 2016 Signature: RECEIVED			
Title: Vice President - Operations				
Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit # 1513326165 has been			
Acknowledgment of transfer. The above request for transfer of injection	n Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the				
Commission records only and does not convey any ownership interest in the	s above injection wents) or preparate			
is acknowledged as	is acknowledged as			
the new operator and may continue to inject fluids as authorized by	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Permit No.: Recommended action:				
remit No.: Recommended action	pointing by No.			
Dele	Date:			
Date:	Authorized Signature			
DISTRICT EPR /2/30/16	PRODUCTION JAN 03 2017 JAN 03 2017			
Mail to: Past Operator New Opera	2011			

#### Must Be Filed For All Wells

Lease Name:	Goins Liv Trust 2-1	*Location: NE SW 2-29S-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)  Producing	
2-1 1513326165	1513326165	2023 FSL 1986 FWL		Gas		
	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			
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		FSL/FNL	FEL/FWL		1/00 1/10:	
		FSL/FNL	FEL/FWL		KCC WICHITA	
•		FSL/FNL	FEL/FWL		JUL 2 7 2016	
		FSL/FNL	FEL/FWL		RECEIVED	
		FSL/FNL	FEL/FWL			

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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## 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: Neosho		
Address 2: Suite 200	Lease Name: Goins Liv Trust 2-1 Well #: 2-1		
City: Oklahoma City State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:  NE SW §2-T29S-R17E		
Contact Person: Jim Allen Phone: ( 405 ) 606-7481 Fax: ( 405 ) 606-7483			
Email Address: jim.allen@riverrockoperating.com	ICHITA		
Surface Owner Information: JUL 2	7 2016		
Name: GOINS OLIN LIVING TRUST	EIVEMen filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1:	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		
Address 2: 1230 120TH RD	county, and in the real estate property tax records of the county treasurer.		
City: THAYER State: KS Zip: 66776 +			
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered select one of the following:	tank batteries, pipelines, and electrical lines. The locations shown on the plat ed 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 ax, and email address.		
KCC will be required to send this information to the surfac	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 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  I hereby certify that the statements made herein are true and corre			
form and the associated Form C-1, Form CB-1, Form T-1, or Form	CP-1 will be returned.		