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 submitted	ted 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.: 226066 Gas /143022 Oil			
Gas Gathering System:	Lease Name: Powers, James M 12-1 NE_ NE_Sec. 12 Twp. 29S R. 17E VE W			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease: NE NE §12-T29S-R17E			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County: Neosho			
Number of Injection Wells***	Production Zone(s): Bartlesville			
Field Name: CHEROKEE BASIN COAL AREA	Injection Zone(s):			
** Side Two Must Be Completed.	ngodon 2016(0).			
Surface Pit Permit No.:1513326169	feet from N / S Line of Section			
(API No. if Drill Pit, WO or Haul)				
- 10	feet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off			
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: 7/15/16			
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	12 Toutes			
Title:	Signature:			
35341	Contact Person: _Jim Allen			
New Operator's License No. 35341 Page Page Operating LLC				
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			
	1513326169			
Acknowledgment of Transfer: The above request for transfer of injection a				
	Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the	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:			
12/20/16	TAN 0 2 2017 JAN 03 7011			
DISTRICT EPR J JULIO II Mail to: Past Operator New Operator	PRODUCTION JAMES U 3 / U 10 U 5 /			

Must Be Filed For All Wells

* Lease Name:	Powers, James M 12-1		* Location: _NE NE 12-29S-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)		
12-1		660 FNL 660 FEL		Gas	Producing		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
***************************************		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		<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				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		- No. 2		
		FSL/FNL	FEL/FWL		-		
19		FSL/FNL	FEL/FWL				
100000000000000000000000000000000000000		FSL/FNL	FEL/FWL				
***************************************		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		MICHITA		
		FSL/FNL	FEL/FWL		WICHITA		
		FSL/FNL	FEL/FWL		2 7 2016		
		FSL/FNL	FEL/FWL		CEIVED		

A separate sheet may be attached if necessary

FEL/FWL

FEL/FWL

FSL/FNL

FSL/FNL

^{*} 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.

OPERATOR: License # 35341	Well Location:		
Name: River Rock Operating, LLC			
Address 1: 211 North Robinson	County: Neosho		
Address 2: Suite 200	Lease Name: Powers, James M 12-1 Well #: 12-1		
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:		
Contact Person: Jim Allen Phone: (405) 606-7481 Fax: (405) 606-7483	NE NE §12-T29S-R17E		
Email Address: jim.allen@riverrockoperating.com	HITA		
JUL 27	2016		
Surface Owner Information: Name: POWERS JAMES & RACHEL ETAL RECEI	VED.		
Address 1:	VED. 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		
Address 1:	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: CHANUTE State: KS Zip: 66720 +	county, and in the rotal counterproperty and rosoled or the county troubants.		
the KCC with a plat showing the predicted locations of lease roads, tar	odic Protection Borehole Intent), you must supply the surface owners and onk batteries, pipelines, and electrical lines. The locations shown on the plat on 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	Act (House Bill 2032), I have provided the following to the surface		
owner(s) of the land upon which the subject well is or will be	being filed is a Form C-1 or Form CB-1, the plat(s) required by this		
owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). It is KCC will be required to send this information to the surface or	being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this s of the surface owner by filling out the top section of this form and		
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