## SCANNED

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 July 2014 Form must be Typed Form must be Signed Alf 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 with this form.	Odireason Act,
Oil Lease: No. of Oil Wells	Effective Date of Transfer:	06/22/16
Gas Lease: No. of Gas Wells 1	KS Dept of Revenue Lease N	
Gas Gathering System:		
Saltwater Disposal Well - Permit No.:	Lease Name: Westnorn,	
Spot Location:feet from N /	S Line NW. SE SW NE Se	c. <u>33 Twp. 29S R. 19E</u>
feet from E /	W Line Legal Description of Lease:	W2 NE
Enhanced Recovery Project Permit No.:		
Entire Project: Yes No	County: Neosho	
Number of Injection Wells **	,	телен жана правитинен и од до или настинен выпатати до
Field Name: CHEROKEE BASIN COAL AREA	Production Zone(s): Cher	
** Side Two Must Be Completed.	Injection Zone(s):	
Surface Pit Permit No.: 1513327474		
(API No. if Drill Pit, WO or Haul)	feet from	
Type of Pit: Emergency Burn S	feet from	E / W Line of Section
	ettling Haul-Off Workover	Drilling レルン
Past Operator's License No33343 /	Contact Person: Stephen M	oriarty
Past Operator's Name & Address: Postrock Midcontinent Pro	oduction LLC Phone: _405-600-7704	
210 Park Ave, Okla. City, OK 73102	Date:	1/20/16
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midco		h Trosler
	Jigilatile.	
New Operator's License No35341	Contact Person: Jim Allen	
New Operator's Name & Address: River Rock Operating, LL		KCC WICHITA
211 N. Robinson, Suite 200	Thore,	
Oklahoma City, OK 73102	Oil / Gas Purchaser: BP En	ergy / // JUL 2 7 2016
	Date: 7/18/16	RECEIVED
Title: Vice President - Operations	Signature:	
Acknowledgment of Transfer: The above request for trans	Ster of injection authorization, curtoes nit normit #	1513327474 bee been
noted, approved and duly recorded in the records of the Kans		
Commission records only and does not convey any ownership	o interest in the above injection well/s) or pit permit	it of transier pertains to Kansas Corporation
	in person in person in the person	
is ackr	nowledged as	is acknowledged as
the new operator and may continue to inject fluids as a	uthorized by the new operator of the above	e named lease containing the surface pit
Permit No.: Recommended action:	, , , , , , , , , , , , , , , , , , , ,	riamed lease containing the surface pit
	permitted by No.:	•
Date:	Date:	1
Authorized Signature	Jane.	Authorized Signature
DISTRICT EPR 1/4	PRODUCTION JAN 05	711.17
Mail to: Past Operator	New Operator	2011 JAN 05 2017

#### Must Be Filed For All Wells

KDOR Lease No.: 231013 \* Lease Name: Westhoff, James A NW SE SW NE 33-29S-19E \* Location: Well No. API No. Footage from Section Line (i.e. FSL = Feet from South Line) Type of Well (Oil/Gas/INJ/WSW) Well Status (PROD/TA'D/Abandoned) (YR DRLD/PRE '67) 1513327474 🗸 33-1 1981 FNL 1977 FEL 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 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 WICH!TA FSL/FNL FEL/FWL JUL 27 2016 FSL/FNL FEL/FWL RECEIVED FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL

A separate sheet may be attached if necessary

FEL/FWL

FEL/FWL

FSL/FNL

FSL/FNL

<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 (Ca	athodic Protection Borehole Intent)
OPERATOR: License # 35341  Name: River Rock Operating, LLC  Address 1: 211 North Robinson  Address 2: Suite 200  City: Oklahorna City State: OK Zip: 73102 +	Well Location:  NW-SE - SW-NE Sec. 33 Twp. 29S S. R. 19E X East West  County: Neosho  Lease Name: Westhoff, James A Well #: 33-1
City: Oktaholita City State: Okt Zip: 75102 +  Contact Person: Jim Allen  Phone: ( 405 ) 606-7481 Fax: ( 405 ) 606-7483  Email Address: jim.allen@riverrockoperating.com  Surface Owner Information:  Name: WESTHOFF JAMES A & WILMA  Address 1:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:  W2 NE  W6
Surface Owner Information:  Name: WESTHOFF JAMES A & WILMA  Address 1:	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.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodi the KCC with a plat showing the predicted locations of lease roads, tank is are preliminary non-binding estimates. The locations may be entered on Select one of the following:	batteries, pipelines, and electrical lines. The locations shown on the plat
I certify that, pursuant to the Kansas Surface Owner Notice Ac owner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ping 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 ack  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 KC	ner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and
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	
I hereby certify that the statements made herein are true and correct to the Date:  7/19/16  Signature of Operator or Agent:	he best of my knowledge and belief.  Vice President - Operations  Title: