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 Compilance with the Kansas Surface Owner Notification Act,

Check Applicable Boxes: MUST be submit	itted 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.: 226062 Lease Name: Umbarger, M Keith SE - NW. NE - NW Sec. 1 Twp. 29S R. 17E VE W Legal Description of Lease: NE NW		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line feet from E / W Line			
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Neosho		
Number of Injection Wells **	Production Zone(s): Mulky, Summit, Bevier, Crowberg, Fleming, Rowe Injection Zone(s):		
CHEDOKEE BASIN COAL ADEA			
** Side Two Must Be Completed.			
Side Iwo must be completed.			
Surface Pit Permit No.: 1513326280 (API No. if Drill Pit, WO or Haul)	feet from N / S Line of Sectionfeet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling		
Past Operator's License No. 33343	Contact Person: Stephen Moriarty		
Berlind, Midney Great Berlinder, 110	Phone: 405-600-7704		
1 ast Operators Name & Address.	Phone: 400-500-7704		
210 Park Ave, Okla. City, OK 73102	Date:		
Title: Stephen Moriarty, Bankruptcy Trustee for Postrock Midcontinent Prod	Signature: My Tristee		
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 / Gas Purchaser: BP Energy		
Oklahoma City, OK 73102	Date: 7/13/16 RECEIVED		
Title: Vice President - Operations	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #1513326280 has been		
	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.:		
1 November 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR /2/30/14	PRODUCTION JAN 03 7017 U. JAN 03 2017		
Mail to: Past Operator New Opera	torDistrict		

Must Be Filed For All Wells

Lease Name:_	Umbarger, M Keith		* Location:N	IE NW 1-29S-17E	
Well No.	API No. (YR DRLD/PRE '67)	Footage from Sec (i.e. FSL = Feet from		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandone
1-1	1513326280	594 FNL 1979 F	WL.	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			
~~~~		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		LCOO MUCHITA
					KCC WICHITA
					JUL 27 2016 RECEIVED
		FSL/FNL			
		FSL/FNL			

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.

### 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	SE-NW-NE-NW Sec. 1 Twp. 29S S. R. 17E ★ East West
Address 1: 211 North Robinson	County: Neosho
Address 1: 211 North Robinson  Address 2: Suite 200	Legga Name: Umbarger M Keith Wall 4: 1-1
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 NW
Email Address: jim.allen@riverrockoperating.com	
Surface Owner Information: KCC WI	CHITA
그는 사람들이 살아보고 있다면 하면 하는데 그는데 그렇게 하는 것이 없는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하	2016 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:RFCE	We wher information can be found in the records of the register of deeds for the
Address 2: 2255 130TH RD	county, and in the real estate property tax records of the county treasurer.
the KCC with a plat showing the predicted locations of lease roads, ta	nodic Protection Borehole Intent), you must supply the surface owners and Ink batteries, pipelines, and electrical lines. The locations shown on the plat
are preliminary non-binding estimates. The locations may be entered	on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
Select one of the following:	on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
Select one of the following:    Certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface clocated: 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
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice 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). I KCC will be required to send this information to the surface of	Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form in 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 owner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice 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). I KCC will be required to send this information to the surface of task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the lift choosing the second option, submit payment of the \$30.00 handling	Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form to 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 bowner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and a KCC, which is enclosed with this form.
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice 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). I KCC will be required to send this information to the surface of task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the	Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form in 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 powner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and a KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1-1 will be returned.