Instructions

A. Please type or print using black or blue ink.
B. Form must be signed by former operator and new operator.
C. Signatories must be listed on their company's Form 1006B.
D. Fill in the complete legal description below.
E. Direct questions to Well Records (405) 521-2271.

OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000
Oklahoma City, OK 73152-2000

Transfer of Operator
Single Oil or Gas Well
OAC 165:10-1-15

This form must be filed with the OCC **within 30 days of transfer** of the well.

Form 1073
Rev. 2017

FEE: $25.00
OAC 165:5-3-1(b)(1)(N)
(SEE BACK PAGE FOR PAYMENT INFORMATION)

OKLA CORP COMM
RECEIPT 1003410014
Date: 09/28/2017 Time: 12:10
Case 000000000 Cashier 1050
Payor SHAMROCK WELL OPERATIONS LLC
Check 001001 $25.00
58 WELL TRANSFER AFTER

API No	3508323960			OTC Prod. Unit No.	083206724				
Surface Location	Sec. 11	Twp 15N	Rge. 03W	C 1/4	N2 1/4	SW 1/4	NE 1/4		
Ft FSL of Qtr Sec	990	Ft FWL of Qtr Sec	660	County	Logan				
Current Well Name/Number	Seward #1-11								
Original Well Name/Number									
Unit Name (if applicable)									

DO NOT WRITE INSIDE THIS BOX

Well Class: ☐ OIL ☒ GAS ☐ DRY

Specify a **well status:** (see back page)
☐ ND ☐ SP ☒ AC ☐ TA ☐ TM

Use this form to transfer single oil or gas wells only. Use Form 1073MW to transfer 10 or more wells.

Producing formation(s) **Prue**

The effective date of transfer of this well, for the purposes of Commission records, is the date that the transfer is approved by the Commission.

10-05-17 Email R

CURRENT OPERATOR	OCC/OTC No. 20721		
Name	**Shields Operating, Inc.**		
Address	**312 South 14th Street**		
City **Fort Smith**	State **AR**	Zip **72901-3834**	
Phone No. **479-785-1222**	FAX No./E-mail 479-782-4375/pshields@shieldsfs.co.		

I verify that I am the legal operator of record with authority to transfer operatorship of this well, that the facts presented herein are true and correct, and that I have completed this form as required by the above instructions.

(Signatory must be listed on company's Form 1006B Operator's Agreement)

Signature

Patrick E. Shields, Operations Manager
Name & Title (**Typed or Printed**)

Signed and sworn to before me this **25th** day of **September**, **2017**.

Misty Morris
Notary Public

My commission expires: 6/26/2027

MISTY MORRIS Comm. No. 12701574 NOTARY PUBLIC My Comm. Exp. 06-26-2027 CRAWFORD CO., ARKANSAS

10-05 Email RJ

NEW OPERATOR	OCC/OTC No. 24071		
Name	**Shamrock Well Operations, LLC**		
Address	**312 South 14th Street**		
City **Fort Smith**	State **AR**	Zip **72901-3834**	
Phone No. **479-785-1222**	FAX No./E-mail 479-782-4375/pshields@shieldsfs.com		

Being the new operator, as of the effective date of transfer, I accept the facts presented as being true and correct and accept the operational responsibility for the well on the described property.

(Signatory must be listed on company's Form 1006B Operator's Agreement)

Signature

Patrick E. Shields, Operations Manager
Name & Title (**Typed or Printed**)

Signed and sworn to before me this **25th** day of **September** **2017**

Misty Morris
Notary Public

My commission expires: 6/26/2027

MISTY MORRIS Comm. No. 12701574 NOTARY PUBLIC My Comm. Exp. 06-26-2027 CRAWFORD CO., ARKANSAS

I verify under oath that I have exercised **due diligence** in attempting to locate the current operator of record according to OCC records who has **abandoned** the listed well/lease and **cannot be located** to obtain signature. **I have attached a certified copy of the recorded lease or assignment, or certified copies of a journal entry of judgment or bankruptcy proceeding pursuant to OAC 165:10-1-15(b).**

Signature

Signed and sworn to before me this _____ day of _____, _____.

Notary Public

My commission expires: _____

FOR OCC USE ONLY

	Surety	*Approved Date*
Well Records Review:	OCT 05 2017 WELL RECORDS APPROVED	OCT 05 2017 WELL RECORDS APPROVED

By processing this Form 1073, the Oklahoma Corporation Commission has approved the contents thereof as to form only. The Oklahoma Corporation Commission does not warrant that the facts provided by the operator are true.

Transfer is not effective until approved by the Well Records Department.

Romonda James

From: Romonda James
Sent: Thursday, October 05, 2017 1:07 PM
To: 'pshields@shieldsfs.com'
Cc: 'PSHIELDS@SHIELDSFS.COM'
Subject: Well Transfers

To Whom It May Concern,

We have approved the transfer of 4 wells from Shields Operating, Inc. (20721) to Shamrock Well Operations, LLC. (24071).

35-083-23960	Seward #1-11	11-15N-03W
35-119-23868	Crockett #4B	13-19N-05E
35-119-23872	Crockett #3A	13-19N-05E
35-027-21444	Pauline #1-21	21-10N-04E

Images of the approved forms will be available online in the next few days.

Sincerely,

Romonda James
Administrative Assistant
Oklahoma Corporation Commission
Well Records Section
Phone: 405.521.2248
r.james@occemail.com
Oklahoma Corporation Commission