

FOR INJECTION, DISPOSAL, AND COMMERCIAL DISPOSAL WELLS ONLY

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

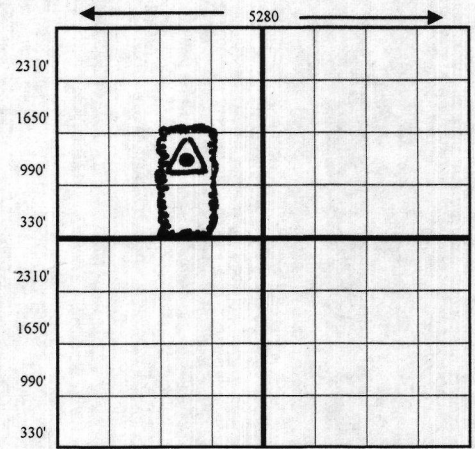
5-6-2013

Form 10731
 Rev. 2012

INSTRUCTIONS

- A. Please type or print using BLACK INK.
- B. Form must be signed by former AND new operator.
- C. Outline boundaries of lease and spot well being transferred.
- D. Attach 1002A for well with an injection/disposal classification.
- E. List O.C.C. order/permit number for injection/disposal.
- F. Attach M.I.T. less than 1 year old. (<90 days for commercial)

Transfer of Operatorship
 OAC 165:10-5-10



| | | | |
|---|------------------------|------------------------------------|--------------------------------|
| API No. 35-12521974 | | OTC Prod. Unit No. _____ | |
| Location 1/4 NW 1/4 SE 1/4 NW 1/4 | | Sec. 4 | Twp. 10N Rge. SE |
| Ft. FSL 990 | Ft. FWL 1650 | County POTTAWATOMIE | |
| Current Well Name & No. KAREN #2 | | | |
| Original Well Name & No. KAREN #2 | | | |
| OCC Permit/Order No. 603053 | | Unit Name (if applicable) _____ | |

Well Classification: Injection Disposal Transfer Effective Date (Month/Day/Year): 05 / 01 / 2013

The effective date of transfer is the date the new operator took over ownership of this well.

| | | | |
|---|--------------------|-----------------------------------|-----------------------------|
| CURRENT OPERATOR | | | OCC/OTC No. 07286 |
| Name COOK OIL CO. | | | |
| Address P.O. Box 875 - 120 W. 2nd | | | |
| City NEWOKA | State OK | Zip 74884 | |
| I verify that I am the legal operator of record with authority to transfer operatorship of this well. | | | |
| Signature Doyle Cook | | | |
| Name & Title (Print or Type) DOYLE COOK - PRESIDENT | | (AC) Phone 405-257-3301 | |
| Signed and sworn to before me this <u>1st</u> day of <u>May</u> , 2013 | | | |
| Notary Public Johnna Ewin 02003978 | | | |
| My Commission Expires: 03-05-14 | | | |

| | | | |
|--|--------------------|-----------------------------------|-----------------------------|
| NEW OPERATOR | | | OCC/OTC No. 23197 |
| Name KELLY COOK OIL LLC | | | |
| Address 2401 N. HARRISON - SUITE 500 | | | |
| City SHAWNEE | State OK | Zip 74804 | |
| Being the new operator, as of the effective date and time of transfer accept the facts presented as being true and correct and accept the operational responsibility for the well on the described property. | | | |
| Signature Kelly Cook | | | |
| Name & Title (Print or Type) KELLY COOK - MANAGER | | (AC) Phone 405-275-5400 | |
| Signed and sworn to before me this <u>1st</u> day of <u>May</u> , 2013 | | | |
| Notary Public Johnna Ewin 02003978 | | | |
| My Commission Expires: 03-05-14 | | | |

| | |
|--|---|
| 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 above well/lease and cannot be located to obtain signature. | Signed and sworn to before me this _____ day of _____ |
| Signature: _____ | Notary Public: _____ |
| My Commission Expires: _____ | My Commission Expires: _____ |

FOR O.C.C. USE ONLY

| | Received | Approved Date | Rejected | Reason |
|--------------|----------|---------------|----------|--------|
| Surety | | 5-3-13 | | |
| UIC | | 5-3-13 | | |
| Well Records | | MAY 07 2013 | | |

By processing this Form 10731, the Oklahoma Corporation Commission has approved the contents thereof as to form only. Oklahoma Corporation Commission does not warrant that the facts provided by the operator are true.

WELL RECORDS APPROVED