

4-11-14

Instructions

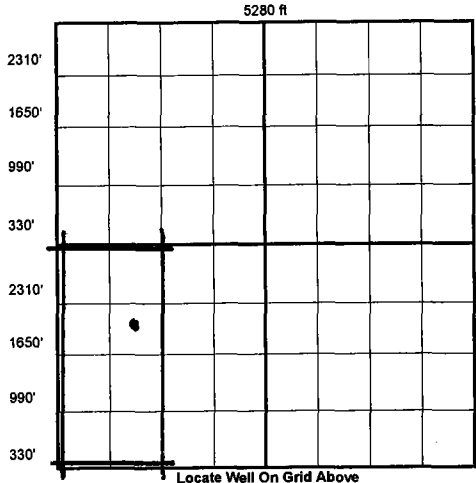
- A. Please type or print using black ink.
- B. Form must be signed by former operator and new operator.
- C. Outline boundaries of lease and spot well being transferred.
- D. Attach 1002A for well.
- E. Direct questions to Well Records (405) 521-2275.

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

Transfer of Operator
 OAC 165:10-1-15

Form 1073
Rev. 2009

| | | | | | |
|---------------------------|----------------------|--------------------|-----------|--------------|---------|
| API No | 35-103-20231 | OTC Prod. Unit No. | 103024348 | | |
| Location | SE 1/4 NW 1/4 SW 1/4 | 1/4 | Sec. 8 | Twp. 21N | Rge. 1W |
| Ft FSL of Qtr Sec | 1725 | Ft FWL of Qtr Sec | 990 | County NOBLE | |
| Current Well Name/Number | VERTZ #5 | | | | |
| Original Well Name/Number | VERTZ #5 | | | | |
| Unit Name (if applicable) | | | | | |



Well Class: OIL GAS DRY

Producing formation(s) VERTZ

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.

| | |
|---|--------------------------------------|
| CURRENT OPERATOR | OCC No. 20885 |
| Name CRAIN & DEISENROTH, LLC | |
| Address PO BOX 2558 | |
| City BROKEN ARROW | State OK |
| Zip 74013 | |
| Phone No. 918-742-4769 | FAX No./E-mail CRAIGD9561@AOL.COM |
| I verify that I am the legal operator of record with authority to transfer operatorship of this well. | |
| <i>M. Craig Deisenroth</i> | |
| Signature | |
| Name & Title (Typed or Printed) M. CRAIG DEISENROTH, MANAGING MEMBER | |
| Signed and sworn to before me this <u>28</u> day of <u>March</u> , <u>2014</u> . | |
| <i>Jamara Foster Deisenroth</i> Notary Public | |
| My commission expires: <u>10-19-15</u> | |

| | |
|---|--------------------------------|
| NEW OPERATOR | OCC No. 23432 |
| Name CRAIN MINERALS LLC | |
| Address 1706 COVENTRY LN | |
| City OKC | State OK |
| Zip 73120 | |
| Phone No. 405-812-5340 | FAX No./E-mail 405-842-2245 |
| I verify that I am the legal operator of record with authority to transfer operatorship of this well. | |
| <i>John Scrain</i> | |
| Signature | |
| Name & Title (Typed or Printed) JOHN SCRAIN MANAGER | |
| Signed and sworn to before me this <u>4</u> day of <u>APRIL</u> , <u>2014</u> . | |
| <i>Tina Diane Copeland</i> Notary Public | |
| Commission # 12011455 My Commission Expires Dec 6, 2016 | |
| My commission expires: <u>Dec 6, 2016</u> | |

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.

I have attached a copy of the certified recorded assignment of lease.

* APPROVED COPY AVAILABLE ON OCC WEBSITE. *

Signature _____

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

Notary Public

My commission expires: _____

FOR OCC USE ONLY

Surety Dept. Approved Rejected Date APR 11 2014 Well Records Dept. Approved Rejected Date APR 14 2014

NOTE: By processing this Form 1073, 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. Form is not approved until approved by Well Records.

APR 14 2014
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WELL RECORDS