

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.

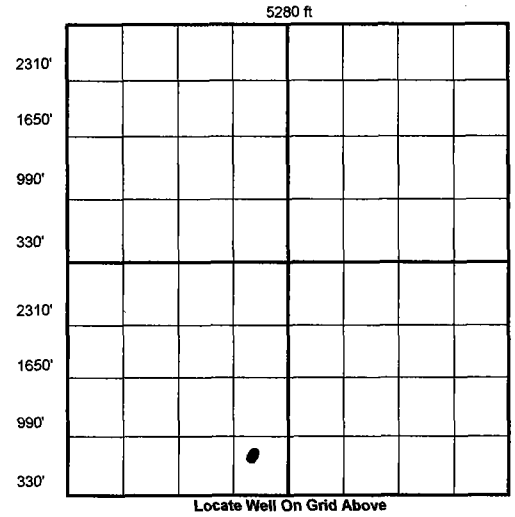
OKLAHOMA CORPORATION COMMISSION

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

Form 1073
 Rev. 2009

Transfer of Operator
 OAC 165:10-1-15

| | | | |
|--|-------------------------------|------------------------|----------------|
| API No. 09576000 | | OTC Prod. Unit No. | |
| Location NW 1/4 SE 1/4 SE 1/4 SW 1/4 | | Sec. 25 | Twp. 5S |
| Rge. 5E | | County Marshall | |
| Ft FSL of Qtr Sec 380 | Ft FWL of Qtr Sec 2300 | | |
| Current Well Name/Number Arbuckle 3 | | | |
| Original Well Name/Number | | | |
| Unit Name (if applicable) | | | |



Well Class: OIL GAS DRY

Producing formation(s)

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. |
| Name | | |
| Address | | |
| City | State | Zip |
| Phone No. | FAX No./E-mail | |
| I verify that I am the legal operator of record with authority to transfer operatorship of this well. | | |
| Signature | | |
| Name & Title (Typed or Printed) | | |
| Signed and sworn to before me this _____ day of _____. | | |
| Notary Public | | |
| My commission expires: _____ | | |

| | | |
|---|--------------------|-------------------------|
| NEW OPERATOR | | OCC No. 20966 |
| Name Henry Woods dba Woods Oil Company | | |
| Address P.O. Box 356 | | |
| City Madill | State OK | Zip 73446 |
| Phone No. 580-795-2383 | FAX No./E-mail | |
| I verify that I am the legal operator of record with authority to transfer operatorship of this well. | | |
| Signature <i>Henry Woods</i> | | |
| Name & Title (Typed or Printed) Henry Woods dba Woods Oil Company | | |
| Signed and sworn to before me this <u>1</u> day of <u>April</u> , 20 <u>14</u> . | | |
| Notary Public | | |
| My commission expires: <u>10-1-2017</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. *

Signed and sworn to before me this 11 day of April, 2014.

Henry Woods
 Signature

Arme Peck
 Notary Public

My commission expires: 10-1-2017

APR 14 2014

FOR OCC USE ONLY
 Surety Dept. Approved Rejected Date **APR 11 2014** Well Records Dept. Approved Rejected Date **APPROVED**

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.

OK Operator will provide 1002A
DKN Operator already operating wells on lease no lease needed