

4-28-14

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

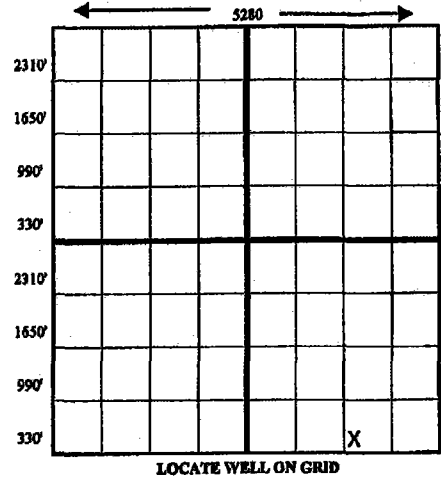
OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000
Oklahoma City, Oklahoma 73152-2000

Form 10731
Rev. 2012

INSTRUCTIONS

1. This form is to be filled out by the operator of the well.
2. The operator must be the owner of the well.
3. The operator must be the owner of the mineral interest.
4. The operator must be the owner of the lease.
5. The operator must be the owner of the wellbore.
6. The operator must be the owner of the wellhead.
7. The operator must be the owner of the well casing.
8. The operator must be the owner of the well completion.
9. The operator must be the owner of the well production.
10. The operator must be the owner of the well abandonment.

Transfer of Operatorship
OAC 165:10-5-10



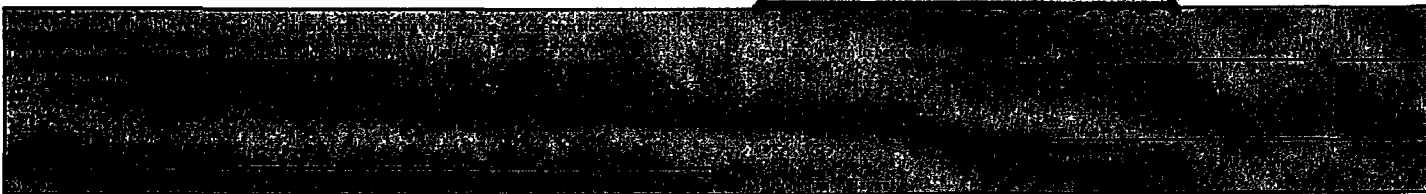
API No. 19-25895		OTC Prod. Unit No.	
Location NW 1/4 SW 1/4 SE 1/4 SE 1/4		Sec. 23	Twp. 4S Rge. 3W
Ft. FSL 494	Ft. FWL 1506	County CARTER	
Current Well Name & No. TRI CITY SWD #1			
Original Well Name & No.			
OCC Permit/Order No. 1005690126	Unit Name (if applicable)		

Well Classification: Injection Disposal Transfer Effective Date (Month/Day/Year): 04 / 01 / 2014

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

CURRENT OPERATOR		OCC/OTC No. 22595
Name TRI-CITY ENERGY, INC.		
Address P.O. BOX 198		
City WILSON	State OK	Zip 73463
I verify that I am the legal operator of record with authority to transfer operatorship of this well.		
Signature <i>[Signature]</i>		
Name & Title (Print or Type) DANEEA BROOKS PRESIDENT		(AC) Phone (580) 668-3453
My Commission Expires: 10-30-2014		

NEW OPERATOR		OCC/OTC No. 23434
Name Cobalt Environmental Solutions, LLC		
Address 114 W. 7th Street, Suite 820		
City Austin	State TX	Zip 76701
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 <i>[Signature]</i>		
Name & Title (Print or Type) Peter Huff - Director		(AC) Phone (512) 289-4080
My Commission Expires: October 4, 2017		



FOR O.C.C. USE ONLY

Received	Approved Date	Rejected	Reason
	APR 23 2014		
	APR 23 2014		
	APR 29 2014		

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