

6-12-14

FOR INJECTION, DISPOSAL, AND COMMERCIAL DISPOSAL WELLS ONLY

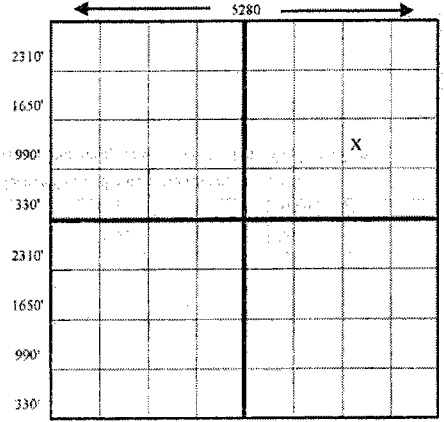
OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000
Oklahoma City, Oklahoma 73152-2000

Form 10731
Rev. 2008

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 injection/disposal well with new operator.
- E. List O.C.C. permit for injection/disposal order.
- F. Attach successful M.I.T. less than one year old.

Transfer of Operatorship
OAC 165:10-5-10



API No. 3502700482		OTC Prod. Unit No. 027-20199	
Location 1/4 NW 1/4 SE 1/4 NE 1/4		Sec. 21	Twp. 10N
Rge. 3		County Cleveland	
Fl. FSL 888	Fl. FWL 1464	Current Well Name & No. Central Short Junction Unit #46	
Original Well Name & No.			
OCC Order No. 405476	Unit Name (if applicable) Central Short Junction Unit		

Well Classification: Injection Disposal Transfer Effective Date (MO/DA/YR): 06/01/2014

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

*Notified by phone 6/13
Contact: Win Holbrook Jr*

*Notified by phone 6/13
Contact: Cindy Delgado Jr*

CURRENT OPERATOR		OCC/OTC No. 21927
Name EnDevCo Eureka LLC		
Address 100 North Broadway, Suite 3300		
City Oklahoma City	State Oklahoma	Zip 73102-8812
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) L. Win Holbrook, Receiver		(AC) Phone 405-235-8735
Signed and sworn to before me this <u>6th</u> day of <u>June</u> , 2014		
Notary Public <i>[Signature]</i> Katherine R. Harris		
My Commission Expires: <u>02/20/18</u>		

NEW OPERATOR		OCC/OTC No. 13651
Name Trey Resources Inc.		
Address P.O. Box 50272		
City Midland	State TX	Zip 79710
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) David M Thomas III, President		(AC) Phone 432-570-6898(303)
Signed and sworn to before me this <u>01st</u> day of <u>June</u> , 2014		
Notary Public <i>[Signature]</i> Kimberly Gale Ware		
My Commission Expires: <u>08/10/14</u>		

I verify under oath 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

FOR O.C.C. USE ONLY

	Received	Approved Date	Rejected	Reason
Surety		JUN 12 2014		
UIC		JUN 12 2014		
Well Records		JUN 13 2014		

By processing this Form 1073, the Oklahoma Corporation Commission warrants 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.**