

FOR INJECTION, DISPOSAL, AND COMMERCIAL DISPOSAL WELLS ONLY

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

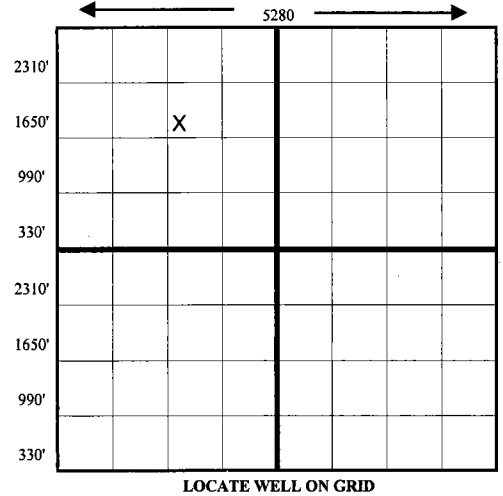
Form 10731
 Rev. 2012

11.24.14

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. Last O.C.C. order/permit number for injection/disposal.
- F. Attach M.I.T. less than 1 year old. (<30 days for commercial).

Transfer of Operatorship
 OAC 165:10-5-10



API No.	099-00574	OTC Prod. Unit No.	099-20709
Location	S/2 1/4 SW 1/4 NE 1/4 NW 1/4	Sec. 2	Twp. 1S Rge. 2E
Ft. FSL	1650	Ft. FWL	1650
County	Murray		
Current Well Name & No.	Collie James B #1 SWD		
Original Well Name & No.	Collie James B #1		
OCC Permit/Order No.	1404740047	Unit Name (if applicable)	

Well Classification: Injection Disposal Transfer Effective Date (Month/Day/Year): 10 / 1 / 2014

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

left vm to

CURRENT OPERATOR Confirm OCC/OTC No. 13613

Name: Synergex, Inc.
 Address: 3705 W. Memorial Road, Suite 1401
 City: Oklahoma City State: OK Zip: 73134

I verify that I am the legal operator of record with authority to transfer operatorship of this well.

Signature: *[Signature]*
 Name & Title: RON D. JAMES, PRES. (AC) Phone: _____

Signer and sworn to before me this 17th day of November, 2014

[Signature]
 Notary Public
 No. 10002205 EXP. 3/16/2018 IN AND OUT OF OKLAHOMA
 My Commission Expires: FOR 3/16/2018

Confirmed with Jessica Hobstead

NEW OPERATOR OCC/OTC No. 23344

Name: Dash Operating, LLC
 Address: 6701 N. Broadway Extension, Suite 301
 City: Oklahoma City State: OK Zip: 73116

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: *[Signature]*
 Name & Title: Spence M. Carson, Manager 405-232-1719 (AC) Phone: _____

Signer and sworn to before me this 17th day of November, 2014

[Signature]
 Notary Public
 No. 10002205 EXP. 3/16/2018 IN AND OUT OF OKLAHOMA
 My Commission Expires: FOR 3/16/2018

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.

FOR O.C.C. USE ONLY

	Received	Approved Date	Rejected	Reason
Survey		NOV 24 2014		
OTC		NOV 24 2014		
Well Records		NOV 25 2014		

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