

**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. Questions should be directed to Well Records (405) 521-2275.

**OKLAHOMA CORPORATION COMMISSION**

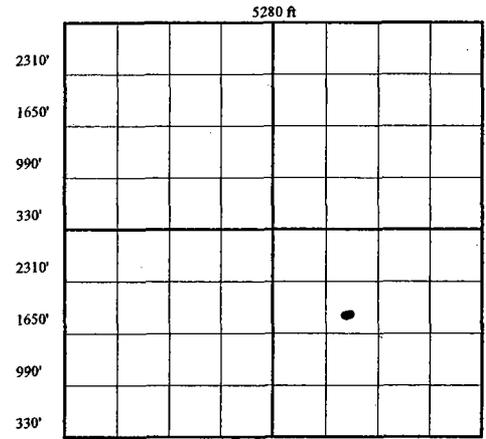
Oil & Gas Conservation Division  
 Post Office Box 52000  
 Oklahoma City, OK 73152-2000

Transfer of Operator  
 OAC 165:10-1-15

2-11-14

Form 1073  
 Rev. 2001

API No. <b>075-21529</b>		OTC Prod. Unit No.	
Location <b>SE 1/4 NW 1/4 SE 1/4 1/4</b>		Sec. <b>20</b>	Twp. <b>7N</b> Rge. <b>17W</b>
Ft FSL of Qtr Sec <b>1485'</b>	Ft FWL of Qtr Sec <b>825'</b>	County <b>Kiowa</b>	
Current Well Name/No. <b>WARNER # D-B</b>			
Original Well Name/No.			
Unit Name (if applicable)			



Locate Well On Grid Above

Well Class:  Oil  Gas  Dry  Plugged

Producing formation(s) <b>PONTOTOC LIME</b>	
Oil Transporter/Purchaser	OTC No.
Gas Measurer	OTC No.

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

**CURRENT OPERATOR**

Name <b>STEDMAN OIL &amp; GAS, LLC</b>		OCC No. <b>22073</b>
Address <b>626 N. HILL ST.</b>		
City <b>HOBART</b>	State <b>OK</b>	Zip <b>73651</b>
Phone No. <b>405-924-2347</b>	FAX No. <b>NA</b>	
I verify that I am the legal operator of record with authority to transfer operatorship of this well.		
Signature <i>Lindsay A. Stedman</i>		
Name & Title (Typed or Printed) <b>LINDSAY A. STEDMAN - OWNER</b>		
Signed and sworn to before me this <b>15th</b> day of <b>February</b>		
Notary Public <b>Deborah Woodall</b>		
My commission expires <b>7-12-14</b>		

**NEW OPERATOR**

Name <b>Eyedropper Energy LLC</b>		OCC No. <b>23151</b>
Address <b>P.O. Box 746</b>		
City <b>HOBART</b>	State <b>OK</b>	Zip <b>73651</b>
Phone No. <b>(580) 512-7840</b>	FAX No. <b>NA</b>	
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>Allen Vickery</i>		
Name & Title (Typed or Printed) <b>Allen Vickery</b>		
Signed and sworn to before me this <b>15th</b> day of <b>February</b>		
Notary Public <b>Deborah Woodall</b>		
My commission expires <b>7-12-14</b>		

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.

Signed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_  
 \_\_\_\_\_  
 Notary Public

My commission expires: \_\_\_\_\_

**FOR OCC USE ONLY**

Surety Dept.  Approved  Rejected Date **APR 10 2014** Well Records Dept.  Approved  Rejected Date **APR 10 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.