

Transfer of Operations Agreement Form

Request the Gas Drilling Inspector to transfer responsibility for Operations from: Existing Operations Company ____ Assigned Operations Company for the following drilling, completion and production operations within the city limits of Fort Worth, Texas. _____, Case GW- _____ Lease Name
 Well name
 ______, API 42-_____, RCDP
Pad
 Well name
 ______, API 42-_____, RCDP
 Pad
Well name _____, API 42-____, RCDP _____ Pad __, API 42-__ , RCDP Well name Pad Please attach additional numbered sheets as needed for all leases and wells involved in the transfer. Number of attached sheets _____. This transfer will be effective on the _____ day of _____, 20____, pending submittal and acceptance of all of the required information and the approval of the Gas Drilling Inspector. In witness whereof, the parties do hereby affix their signatures and enter into this agreement as to the _____ day of _____, 20_____. Existing Operator agent_____, date _____, Print Name ______, Company _____ Assigned Operator agent_____, date _____, Print Name ______, Company ____ Notarized: Before me, the undersigned notary public, on the day personally appeared _______ _, title _____, representing the ______ company (Existing , and ______, title ______, representing the _____, representing the Operator), and Operator), and ______, title _____, representing the ______ company (Assigned Operator), known to me as the persons whose names are subscribed to the foregoing instrument, and acknowledged to me that these persons executed the same for the purposes and consideration therein expressed, and in the capacity herein stated, and as the act and deed of said companies in the capacity herein stated. Given under my hand and seal of office this _____ day of _____, 20_____, _____, Commission Expires: _____. Notary public_ Notary stamp: Before me, the undersigned notary public, on the day personally appeared _____ __, title _____, representing the ______ company (Existing _____, title ______, representing the representing the ______, represen Operator), and ____ are subscribed to the foregoing instrument, and acknowledged to me that these persons executed the same for the purposes and consideration therein expressed, and in the capacity herein stated, and as the act and deed of said companies in the capacity herein stated. Given under my hand and seal of office this _____ day of _____, 20_____, _____, Commission Expires: ____ Notary public_ Notary stamp: * If you are a new operator in the City of Fort Worth you are required to fill out an application for drilling completion form, and also submit required on file items from checklist.

DEVELOPMENT SERVICES DEPARTMENT

The City of Fort Worth * 100 Fort Worth Trail* Fort Worth, TX



76102 817-392-1427