TRANSFER OF OPERATIONS AGREEMENT FORM
FOR PREVIOUSLY PERMITTED GAS WELL SPECIAL USE PERMIT

Instructions: Please complete one form for each permitted gas well/special use permit to be transferred. The Assigned Operator must complete and submit the Assigned Operator Application Form, Pay applicable SUP Transfer fees; Submit an Approved Copy of Texas Railroad Commission Form P4; and meet all insurance requirements. Questions can be directed to City Secretary Dianna Buchanan at dbuchanan@haslet.org or by calling 817-439-5931 ext. 102.

Existing Operations Company
_____
Requests the City of Haslet transfer responsibility for Operations to
Assigned Operations Company
_____
for the following drilling, completion & production operations in the city limits of Haslet, TX:
Lease Name:_____ Well Name/#:_____
Haslet SUP#:_____ RRC Permit #:_____
Abstract, Survey, County:_____

X Coordinate: _____ Y Coordinate:_____ NAD:_____
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This transfer will be effective on the _____ day of _____, 20__, pending submittal and acceptance of all the required information and the approval of the City of Haslet.

In witness whereof, the parties do hereby affix their signatures and enter into this agreement this the _____ day of _____, 20__.

Existing Operator Agent:_____, Date:_____
Print Name:_____ Company:_____
Address:_____
Telephone:_____ Email Address:_____

Assigned Operator Agent:_____, Date:_____
Print Name:_____ Company:_____
Address:_____
Telephone:_____ Email Address:_____
Emergency Contact Name:_____
Emergency Contact Telephone Number:_____

TRANSFER OF OPERATIONS CONTINUED

Lease Name:_____Well Name:_____ SUP Number:_____
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EXISTING OPERATOR NOTARIZATION:

Before me, the undersigned notary public, on this day personally appeared _____, title_____, representing _____, Existing Operator, known to me as the person whose name is subscribed to the foregoing instrument and acknowledged to me that this person executed the same for the purpose and consideration therein expressed, and in the capacity herein stated, and as the act and deed of said companies in the capacity therein stated.

Given under my hand and seal of office this ____ day of _____, 20__.

Notary Public:_____

(Seal) **Commission Expires:_____**
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ASSIGNED OPERATOR NOTARIZATION:

Before me, the undersigned notary public, on this day personally appeared _____, title_____, representing _____, Assigned Operator, known to me as the person whose name is subscribed to the foregoing instrument and acknowledged to me that this person executed the same for the purpose and consideration therein expressed, and in the capacity herein stated, and as the act and deed of said companies in the capacity therein stated.

Given under my hand and seal of office this ____ day of _____, 20__.

Notary Public:_____

(Seal) **Commission Expires:_____**

*Assigned Operator Must Complete and Submit the Assigned Operator Application Form