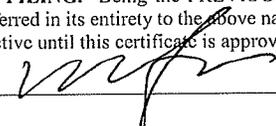
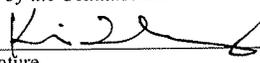


**CERTIFICATE OF COMPLIANCE
 AND TRANSPORTATION AUTHORITY**

READ INSTRUCTIONS ON BACK

1. Field name exactly as shown on proration schedule WOLFBONE (TREND AREA)		2. Lease name as shown on proration schedule UL 24 VOYAGER		
3. Current operator name exactly as shown on P-5 Organization Report KZ GLOBAL ENERGY, LLC		4. Operator P-5 no. 100394	5. Oil Lse/Gas ID no. 50017	6. County PECOS
8. Operator address including city, state, and zip code 1200 SOLDIERS FIELD DR STE 188 SUGAR LAND TX 77479		9. Well no(s) (see instruction E) ALL		
		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)		11. Effective Date 1st July, 2022
12. Purpose of Filing. (Complete section a or b below.) (See instructions B and G)				
a. Change of: <input checked="" type="checkbox"/> operator <input type="checkbox"/> oil or condensate gatherer <input type="checkbox"/> gas gatherer <input type="checkbox"/> gas purchaser <input type="checkbox"/> gas purchaser system code				
<input type="checkbox"/> field name from: _____ <input type="checkbox"/> lease name from: _____ OR				
b. New RRC Number for: <input type="checkbox"/> oil lease <input type="checkbox"/> gas well <input type="checkbox"/> other well (specify) _____				
Due to: <input type="checkbox"/> new completion or recompletion <input type="checkbox"/> reclass oil to gas <input type="checkbox"/> reclass gas to oil <input type="checkbox"/> consolidation, unitization, or subdivision (oil lease only)				
13. Authorized GAS WELL GAS or CASINGHEAD GAS Gatherer(s) and/or Purchaser(s). (See instruction G).				
Gatherer	Purchaser	Name of GAS WELL GAS or CASINGHEAD GAS Gatherer(s) or Purchaser(s) As Indicated in Columns to the Left (Attach an additional sheet in same format if more space is needed)		Purchaser's RRC Assigned System Code
X	X	ENERGY TRANSFER COMPANY		Percent of Take 100
				Full-well stream
14. Authorized OIL or CONDENSATE Gatherer(s). (See instruction G).			RRC USE ONLY	
Name of OIL or CONDENSATE Gatherer(s) - List Highest Volume Gatherer First (Attach an additional sheet in same format if more space is needed)		Percent of Take	Reviewer's initials: _____	
TRANSOIL MARKETING, LLC		50	Approval date: _____	
SENTINEL TRANSPORTATION, LLC		30		
BML, INC. B		20		
15. PREVIOUS OPERATOR CERTIFICATION FOR CHANGE OF OPERATOR P-4 FILING. Being the PREVIOUS OPERATOR, I certify that operating responsibility for the well(s) designated in this filing, located on the subject lease has been transferred in its entirety to the above named Current Operator. I understand, as Previous Operator, that designation of the above named operator as Current Operator is not effective until this certificate is approved by the Commission.				
KEM ENERGY, Inc Name of Previous Operator WEIFAN Name (print) CEO Title				
		Signature 	<input checked="" type="checkbox"/> Authorized Employee of previous operator Date: 06/25/2022 <input type="checkbox"/> Authorized agent of previous operator (see instruction G) Phone with area code: (832)-421-8985	
16. CURRENT OPERATOR CERTIFICATION. By signing this certificate as the Current Operator, I certify that all statements on this form are true and correct and I acknowledge responsibility for the regulatory compliance of the subject lease including plugging of well(s) pursuant to Rule 14. I further acknowledge that I assume responsibility for the physical operation, control, and proper plugging of each well designated in this filing. I also acknowledge that I will remain designated as the Current Operator until a new certificate designating a new Current Operator is approved by the Commission.				
KAI ZHONG Name (print) CEO Title				
		Signature 	<input checked="" type="checkbox"/> Authorized Employee of current operator Date: 07/20/2022 <input type="checkbox"/> Authorized agent of current operator (see instruction G) Phone with area code: _____	
E-mail Address (optional)				