7.FORM PTO-1595 03 - 22 - 2	U.S. DEPARTMENT OF COMMERCE
102027618 To the Honorable Commissioner of Patents and Trademarks. Please record the attached original documents or copy	
thereof.	
Name of conveying party(ies): Name of conveying party(ies): Name of conveying party(ies):	Name and address of receiving party(ies):
William S. Halliday Dennis K. Clapper Michael Jarrett Michelle Carr	Name: <u>Baker Hughes Incorporated</u>
3-4-02	Address: 3900 Essex Lane, Suite 1100
Additional Name(s) of conveying party(ies) attached?	Address. Osob Essex Edite, Odite 1700
[] Yes	City: <u>Houston</u> State: <u>Texas</u> ZIP: <u>77027</u>
3. Nature of conveyance: [X] Assignment	Additional name(s) & address(es) attached?
[] Other	[] Yes [X] No
Execution Dates: <u>January 18, 21 and 22, 2002</u> 4. Application number(s) or patent number(s):	<u> </u>
09/997,830	
If this document is being filed together with a new applicatio application is: A. Patent Application No.(s)	n, the execution date of the B. Patent No.(s)
A. Taterit Application 110.(5)	:
Additional numbers attached? [] Yes [X] No	
5. Name and address of party to whom correspondence	6. Total number of applications and patents involved:
concerning documents should be mailed:	[1]
Name: Paula D. Morris Internal Address: Paula D. Morris & Assoc., P.C.	7. Total fee (37 CFR 1.21(h)): \$40.00
2925 Briarpark, Suite 930	(Paid, See Attached)
Mailing Address: <u>Same</u> City: Houston State: Texas ZIP: 77042	[] Enclosed [X] Charge Deposit Account
City: <u>Houston</u> State: <u>Texas</u> ZIP: 77042	8. Deposit account number: 02-0429(154-27883-US) (Attach duplicate copy of this page if paying by deposit account)
DO NOT USE THIS SPACE	(media supmouto cos) or more page.
Statement and signature.	
To the best of my knowledge and belief, the foregoing info copy of the original document.	ormation is true and correct and any attached copy is a true
Paula D. Morris	11/01/15 Z-1/-02
Name of Person Signing Signature	Date
Total number of pages including cover sheet, attachments, and document: [3]	

Do not detach this portion

Maindocuments to be recorded with required cover sheet information to:4

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Public burden reporting for this sample cover sheet is estimated to average about 30 minutes per document to be recorded, including time for reviewing the document/and gathering the data needed, and completing and reviewing the sample cover sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Office of Information Systems, PK2-1000C, Washington, DC 20231, and to the Office of Management and Budget, Paperwork Reduction Project, (0651-0011), Washington, DC 20503.

ASSIGNMENT

IN CONSIDERATION OF ONE (1) DOLLAR AND OTHER GOOD AND VALUABLE CONSIDERATION, the receipt, sufficiency and adequacy of which are hereby acknowledged, the undersigned, do/does hereby:

SELL, ASSIGN AND TRANSFER to BAKER HUGHES INCORPORATED, having a place of business at 3900 ESSEX LANE, SUITE 1100, HOUSTON, TEXAS 77027, my entire right, title and interest for the United States and all foreign countries in and to any and all inventions and improvements which are disclosed in the application for United States Letters Patent, which has been executed by the undersigned and is entitled ACID SOLUBLE, HIGH FLUID LOSS PILL FOR LOST CIRCULATION, (further identified as [Serial or Attorney Docket] No. 154-27883-US) such application and all divisional, continuing, substitute, renewal, reissue and all other applications for patent which have been or shall be filed in the United States and all foreign countries on any of such inventions or improvements; all original and reissued patents which have been or shall be issued in the United States and all foreign applications under the provisions of any convention or treaty and claim priority based on such application in the United States;

AUTHORIZE AND HEREBY REQUEST the issuing authorities to issue any and all United States and foreign patents granted on such inventions or improvements to **BAKER HUGHES INCORPORATED**;

WARRANT AND COVENANT that no assignment, grant, mortgage, license or other agreement affecting the rights and property herein conveyed has been or will be made to others by the undersigned, and that the full right to convey the same as herein expressed is possessed by the undersigned;

COVENANT, when requested and at the expense of the Assignee, to carry out in good faith the intent and purposes of this assignment, the undersigned will execute all divisional, continuing, substitute, renewal, reissue, and all other patent applications on any and all such improvements; execute all rightful oaths, declarations, assignments, powers of attorney and other papers; communicate to the Assignee all facts known to the undersigned relating to such improvements and the history thereof; and generally do everything possible which the Assignee shall consider desirable for vesting title to such improvements in the Assignee, and for securing, maintaining and enforcing proper patent protection for such improvements;

TO BE BINDING on the heirs, assigns, representatives and successors of the undersigned and extend to the successors, assigns and nominees of the Assignee.

Page 1 of 2

IN WITNESS WHEREOF, the undersigned has (have) hereunto subscribed his/her (their) name(s) on the date set opposite his/her (their) signature(s) (Signature) Name: STATE OF : _____ COUNTY OF: _____ BEFORE ME, Wiliam S. Halliday, on this 21 day of March, 2002, personally appeared and acknowledged to me that (he/she) executed the same of (his/her) own free will for the purposes and consideration therein expressed. ANGELICA M. POGSON MY COMMISSION EXPIRES July 28, 2003 Seal Date 1/18/02 (Signature) Acumi K. Cleyn.
Name: Dennis K. Clapper TEXAS STATE OF: COUNTY OF: HANRIS BEFORE ME, Dennis K. Clapper, on this 18 day of January, 2002, personally appeared and acknowledged to me that (he/she) executed the same of (his/her) own

Seal

free will for the purposes and consideration therein expressed.

ANGELICA M. POGSON MY COMMISSION EXPIRES July 28, 2003

ASSIGNMENT

Date 1/22 /02 (Signature) Name: STATE OF: COUNTY OF: BEFORE ME, Michael Jarrett, on this 22 day of __ personally appeared and acknowledged to me that (he/she) executed the same of (his/her) own free will for the purposes and consideration therein expressed. ANGELICA M. POGSON Notary Public MY COMMISSION EXPIRES July 28, 2003 Seal Date 1/22/02 (Signature) Name: Michelle Carr STATE OF: COUNTY OF: _____ BEFORE ME, Michelle Carr, on this 22 day of ___ personally appeared and acknowledged to me that (he/she) executed the same of (his/her) own free will for the purposes and consideration therein expressed.

Seal

ANGELICA M. POGSON MY COMMISSION EXPIRES July 28, 2003

RECORDED: 03/04/2002