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| Name of conveying party(ies) | 2. Name and address of receiving party(ies) | |
| in taking of control in a party (con) | Name: Watson Well Solutions, LLC | |
| Otis Oilfield Services LLC | Internal Address: | |
| Additional name(s) of conveying party(ies) attached? Yes No 3. Nature of conveyance/Execution Date(s): | Street Address: 1431 125th Avenue NW | |
| Execution Date(s) 05/28/2013 | | |
| Assignment Merger Security Agreement Change of Name | City: Watford City | |
| Joint Research Agreement | State: ND | |
| Government Interest Assignment Executive Order 9424, Confirmatory License | Country: US Zip: 58854 | |
| Other | Additional name(s) & address(es) attached? Yes No | |
| | document serves as an Oath/Declaration (37 CFR 1.63). B. Patent No.(s) | |
| A. Patent Application No.(s) | B. Tatelli No.(o) | |
| 14/034,823 | | |
| * | ttached? Yes No | |
| 5. Name and address to whom correspondence | 6. Total number of applications and patents involved: 1 | |
| concerning document should be mailed: Name: Paul E. Rossler | | |
| | 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40 | |
| Internal Address: GableGotwals | Authorized to be charged to deposit account | |
| Street Address: 100 W. 5th Street, 10th Floor | Enclosed | |
| Street Address: 100 W. out oddod, 100 W. | g hamman | |
| | None required (government interest not affecting title) | |
| City: Tulsa | 8. Payment Information | |
| City: Tulsa State: OK Zip: 74103 | | |
| State: OK Zip: 74103 Phone Number: 918-595-4963 | 8. Payment Information | |
| State: OK Zip: 74103 Phone Number: 918-595-4963 Docket Number: 010275-00003 | 8. Payment Information Deposit Account Number 50-1971 | |
| State: OK Zip: 74103 | 8. Payment Information Deposit Account Number 50-1971 Authorized User Name Paul E. Rossler | |
| State: OK Zip: 74103 Phone Number: 918-595-4963 Docket Number: 010275-00003 Email Address: iplaw@gablelaw.com 9. Signature: | 8. Payment Information Deposit Account Number 50-1971 | |
| State: OK Zip: 74103 Phone Number: 918-595-4963 Docket Number: 010275-00003 Email Address: iplaw@gablelaw.com 9. Signature: Signature | 8. Payment Information Deposit Account Number 50-1971 Authorized User Name Paul E. Rossler 09/24/2013 Date Total number of pages including cover 2 | |
| State: OK Zip: 74103 Phone Number: 918-595-4963 Docket Number: 010275-00003 Email Address: iplaw@gablelaw.com 9. Signature: Paul E. Rossler Name of Person Signing | 8. Payment Information Deposit Account Number 50-1971 Authorized User Name Paul E. Rossler | |



BUSINESS / FARM / PROFESSIONAL LIMITED LABILITY COMPANY ARTICLES OF AMENDMENT

SECRETARY OF STATE SFN 58703 (7-2012)

FILING FEE \$50.00

FOR OFFICE USE ONLY

ID Number Work Order Number

RECEIVER

MAY 3 0 2013

SEC. OF STATE

| סבר ווופדסוומדוח) | ns for fees, filing and M | AILING INFORMATION. |
|--|----------------------------------|-----------------------------|
| PE OR PRINT LEGIBLY Name of the Limited Liability Company as Reflected in the Articles of Organization of as Last Ame | anded 2. Federal ID Number | 3. Telephone Number |
| Name of the Limited Liability Company as Reflected in the Attaces of Organization and Filed with the Secretary of State | | |
| | 90-0874895 | (701) 842-6688 |
| tis Oilfield Services LLC Complete Mailing Address of the Principal Executive Office (Street/RR, PO Box, City, State, ZIP+ | 4) 5. Toll-free Telephone | Number |
| Complete Mailing Address of the Principal Executive Office (COSE) | | |
| 131 125th Avenue NW, Watford City, ND 58854-9232 The following amendment has been adopted pursuant to the provisions of the North Dakota Limit | led Liability Company Act, N.D. | .C.C. Chapter 10-32 |
| The following amendment has been adopted pursuant to the provisions of the visions of the vision | | |
| · | 11 0 | |
| Article I, The name of the Limited Liability Company is Watson Well Solution | ns, LLC | |
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| 7. The manner in which an exchange, reclassification, division, combination, or cancellation or m | rembership Interests is effected | |
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| Membership Interesis not affected. | | |
| | *** | |
| 8. The amendment shall be effective: (check one) | | |
| Minen filed with the Secretary of State Later on (month, day, year) | | |
| | nt, has read the foregoing Artic | les of Amendment, knows the |
| 9. "The undersigned, a person authorized by the limited liability company to sign this amendment contents, and believes the statements to be true. I further authorize the Secretary of State to contents, and believes the statement in this document, I may be subject to criminal pen | correct numbers 1 and 6 if no | correctly renected. |
| contents, and believes the statements to be true. I further authorize the declary of contents, and believes the statement in this document, I may be subject to criminal pen understand that if I make a false statement in this document, I may be subject to criminal pen | nalties." | |
| . understand that if I make a laise statement in this votation | Date | |
| Signature/.// LD / / | 5/28/2013 | • |
| MIGHAN | Daytime Telephor | ne Number and Extension, if |
| 10. Name of Person to Contact About This Document tduncan@heleyduncan.com | 1 | |
| 10. Name of Person to Contact About this Document to the total total duncan@heleyduncan.com | 1 (802) 041-02 | |

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