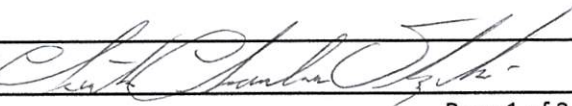


LM#28

NC Department of Environment and Natural Resources  
Landman Registry Application

|   |                           |                |                                      |                    |           |
|---|---------------------------|----------------|--------------------------------------|--------------------|-----------|
| First Name:   | CHESTER                   | Middle Name:   | CHARLES                              | Last Name:         | OLSZEWSKI |
| Business Address  |                           |                |                                      |                    |           |
| Street Address:   | 135 LEE DANIEL DRIVE EXT. |                |                                      | Apt/Unit #:        | N/A       |
| City:   | ATLANTIC                  | State:         | NC.                                  | ZIP Code:          | 28511     |
| Phone Number:   | (252) -225-8341           | Email Address: | FRG1226@HOTMAIL.COM (All Lower Case) |                    |           |
| Have you ever held a landman registration or similar license in another state?  |                           |                |                                      |                    | NO        |
| If yes, please list all states or jurisdictions where you have had such a registration or license below. Use additional paper if necessary.   |                           |                |                                      |                    |           |
|   |                           |                |                                      |                    |           |
|   |                           |                |                                      |                    |           |
|   |                           |                |                                      |                    |           |
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|   |                           |                |                                      |                    |           |
|   |                           |                |                                      |                    |           |
|   |                           |                |                                      |                    |           |
| Have any of these registrations or licenses ever been revoked or suspended?   |                           |                |                                      |                    | NO / N/A  |
| If yes, please list all states or jurisdictions where a similar registration or license has been suspended or revoked.  |                           |                |                                      |                    |           |
|   |                           |                |                                      |                    |           |
|   |                           |                |                                      |                    |           |
|   |                           |                |                                      |                    |           |
| Please state, using a complete sentence, whether or not there are any pending judgments or tax liens existing against you. TO THE BEST OF MY KNOWLEDGE THERE ARE NO PENDING JUDGEMENTS OR TAX LIENS EXISTING AGAINST MY NAME / SELF |                           |                |                                      |                    |           |
| Signature:   |                           |                |                                      | Date: 01 June 2014 |           |

**NOTE:** If there are any material changes in the information you provide on this form, please notify the Department in writing within 30 days of the change.

