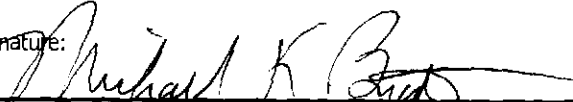
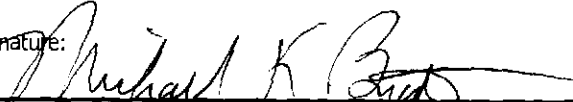
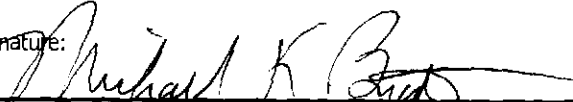


No. <b>W 96720</b>	<b>Due no later than Sep 30, 2015 Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> MICHAEL K BRANSTETTER 416 RIVER ST WALLACE ID 83873																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> MIDWEST ROYALTY AND EXPLORATION, LLC PO BOX 709 WALLACE ID 83873		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 15%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Michael K. Branstetter</td> <td>P.O. Box 709</td> <td>Wallace</td> <td>ID</td> <td>USA</td> <td>83873</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Michael K. Branstetter	P.O. Box 709	Wallace	ID	USA	83873	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <div style="text-align: center;"> <b>IDAHO</b>  <b>W 96720</b> </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; border-bottom: 1px solid black;">           Signature:  </td> <td style="width: 30%; border-bottom: 1px solid black;">           Date: <u>7/28/15</u> </td> </tr> <tr> <td style="border-bottom: 1px solid black;">           Name (type or print):            Michael K. Branstetter         </td> <td style="border-bottom: 1px solid black;">           Title:            Manager         </td> </tr> </table>			Signature: 	Date: <u>7/28/15</u>	Name (type or print): Michael K. Branstetter	Title: Manager																															
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Issued 07/20/2015 by CLH

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM