UCC FINANCING STATEMENT AMENDME	NT	EUREKA COUI UCC-COT Rec:\$60.00 Total:\$60.00	NTY, NV	2022-2 01/31/2022 09	
A. NAME & PHONE OF CONTACT AT FILER (optional) Jonathan Rogers, 405-553-2320		HALL ESTILL A	TTORNE	YS AT LAW	rys-i
B. E-MAIL CONTACT AT FILER (optional) jlrogers@hallestill.com				HU N NU HAU	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		000153053	02202477	330010018	
Daniel J. Glover		000133332 LI	SA HOEH	NE, CLERK RECORE	DER
Hall, Estill, Hardwick, Gable, Golden & Nelson 100 N. Broadway, Suite 2900			Name of the last o		\
Oklahoma City, Oklahoma 73102			The second of the second of		/
L		THE ABOVE S	PACE IS FO	R FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER Document No. 0232876	1	This FINANCING STA	TEMENT AME	NDMENT is to be filed [for	record]
TERMINATION: Effectiveness of the Financing Statement identified a Statement	above is terminated wi				
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a of For partial assignment, complete items 7 and 9 and also indicate affected.		Assignee in item 7c <u>and</u> nam	e of Assignor	in item 9	
CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law		the security interest(s) of S	Secured Party	authorizing this Continuation	on Statement is
5. PARTY INFORMATION CHANGE:	_		$\overline{}$		
	one of these three box		name: Comple	ate item DELETE name:	Give record nam
This Change affects Debtor or Secured Party of record ite	m 6a or 6b; <u>and</u> item 7a	or 7b and item 7c 7a or	7b, <u>and</u> item 7	to be deleted in i	
CURRENT RECORD INFORMATION: Complete for Party Information C Ga. ORGANIZATION'S NAME	hange - provide only <u>o</u>	<u>e</u> name (6a or 6b)	\	<u> </u>	
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
(/		/		>	
 CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Info Tra. ORGANIZATION'S NAME 	rmation Change - provide or	y <u>one</u> name (7a or 7b) (use exact, fu	Il name; do not o	mit, modify, or abbreviate any part o	f the Debtor's name)
78. ORGANIZATIONS NAME	1	\ \			
7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUALS FIRST FERSOIVAL IVAME		/ /			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS	ICITY				
re. Mailing Address			STATE	POSTAL CODE	COUNTRY
		DELETE colleteral			
	ADD collateral	DELETE collateral			
COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral			
COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral			
COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral			
8. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: 9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS	ADD collateral	vide only <u>one</u> name (9a or 9b	RESTATE	overed collateral A	ASSIGN collatera
8. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS	ADD collateral	vide only <u>one</u> name (9a or 9b	RESTATE	overed collateral A	ASSIGN collatera
8. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: 9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS If this is an Amendment authorized by a DEBTOR, check here and provice.	ADD collateral	vide only <u>one</u> name (9a or 9b Debtor	RESTATE of	overed collateral A	ASSIGN collatera