



PROXY FORM

The Secretary
Victoria Petroleum N.L.
Level 36, Exchange Plaza
2 The Esplanade
PERTH WA 6000

I/We **As Above**.....
(Full Name – Block Letters)

of **As Above**.....
being a member of Victoria Petroleum N.L. hereby appoint

Alexander Bajada to exercise **100%** of my/our voting rights
(Name of 1st Proxy)

..... to exercise% of my/our voting rights
(2nd Proxy – Optional)

Or in his/her absence, the Chairman of the meeting as my/our proxy/proxies to vote on my/our behalf at the General Meeting of the Company to be held at 11.00am on Thursday, 27 March 2008 and at any adjournment thereof.

The Chairman of the meeting will act as your proxy if you do not appoint someone. It is the Chairman’s intention to exercise undirected proxies against resolutions 1-8 and in favour of resolution 9.

I/We understand that if I/we have not directed my/our how to vote, my/our proxy may vote or abstain from voting as he or she thinks fit.

RESOLUTIONS

	FOR	AGAINST	ABSTAIN
1. Appointment of Director Mr Edward S. Smith	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Appointment of Director Mr Geoffrey A. Gander	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Appointment of Director James B. Crawford	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Removal of Director Mr Robert J. Pett	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Removal of Director Mr John T. Kopcheff	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Removal of Director Mr Timothy L. Hoops	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Removal of Director Mr Bernard Wrixon	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Removal of Other Directors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Ratify Allotment of Shares	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

PLEASE SIGN HERE

This section *must* be signed in accordance with the instructions below to enable your directions to be given effect to.

Individual or Shareholder 1

**Sole Director and
Sole Company Secretary**

Shareholder 2

Director

Shareholder 3

Director/Company Secretary

In addition to signing the proxy form in the above box(es), please provide the information below in case we need to contact you:

Contact Name

Contact Daytime Telephone

25/03/2008
Date