



CHX Holdings, Inc.

Application for Access To Indications of Interest

The purpose of this form is to collection information from persons in connection with: (i) requests for information underlying existing indications of interest displayed on CHX Holdings' indication of interest board (the "I-Board"); or (ii) submissions of new indications of interest to purchase or sell shares of CHX Holdings, Inc. common stock, which submissions will be posted on the I-Board.

TRANSFER RESTRICTIONS

CHX HOLDINGS' COMMON STOCK IS SUBJECT TO LIMITATIONS ON TRANSFER, OWNERSHIP AND VOTING. THESE LIMITATIONS INCLUDE THE FOLLOWING:

1. CHX HOLDINGS COMMON STOCK HAS NOT BEEN REGISTERED UNDER THE SECURITIES ACT OF 1933, AS AMENDED, AND MAY NOT BE TRANSFERRED WITHOUT REGISTRATION UNDER SUCH ACT OR PURSUANT TO AN EXEMPTION THEREFROM. CHX HOLDINGS MAY REQUIRE AN OPINION OF COUNSEL REASONABLY SATISFACTORY TO CHX HOLDINGS THAT SUCH AN EXEMPTION IS AVAILABLE. PLEASE SEE ARTICLE IX, SECTION 3 OF THE CHX HOLDINGS BYLAWS.
2. NO PERSON, EITHER ALONE OR TOGETHER WITH ITS RELATED PERSONS MAY (A) OWN, DIRECTLY OR INDIRECTLY, OF RECORD OR BENEFICIALLY, SHARES CONSTITUTING MORE THAN FORTY PERCENT (40%) (OR TWENTY PERCENT (20%) IF SUCH PERSON HOLDS A TRADING PERMIT OF THE CHICAGO STOCK EXCHANGE, INC.) OF ANY CLASS OF CAPITAL STOCK OF THE CORPORATION, OR (B) DIRECTLY, INDIRECTLY OR PURSUANT TO A VOTING TRUST, AGREEMENT, PLAN OR OTHER ARRANGEMENT, VOTE OR CAUSE THE VOTING OF SHARES OF CAPITAL STOCK OF THE CORPORATION REPRESENTING MORE THAN TWENTY PERCENT (20%) OF THE VOTING POWER THEN ISSUED AND OUTSTANDING OR GIVE ANY CONSENT TO OR PROXY WITH RESPECT THERETO, NOR MAY ANY PERSON ENTER INTO ANY SUCH ARRANGEMENT THAT WOULD ENABLE ANY PERSON TO VOTE OR CAUSE THE VOTING OF MORE THAN TWENTY PERCENT (20%) OF SUCH VOTING POWER. FOR MORE INFORMATION, INCLUDING INFORMATION REGARDING ANY REPORTING AND NOTICE OBLIGATIONS WITH RESPECT TO THESE RESTRICTIONS, PLEASE SEE THE TEXT OF ARTICLE FIFTH OF THE CORPORATION'S RESTATED CERTIFICATE OF INCORPORATION, EFFECTIVE AS OF FEBRUARY 9, 2005.
3. NO STOCKHOLDER MAY TRANSFER COMMON STOCK EXCEPT IN BLOCKS OF 1000 SHARES PER TRANSFER. PLEASE SEE ARTICLE IX, SECTION 2 OF THE CHX HOLDINGS' BYLAWS.
4. NO STOCKHOLDER MAY TRANSFER COMMON STOCK UNTIL ALL AMOUNTS DUE AND OWING BY SUCH STOCKHOLDER TO THE CHICAGO STOCK EXCHANGE, INC. HAVE BEEN PAID IN FULL. PLEASE SEE ARTICLE IX, SECTION 3 OF THE CHX HOLDINGS' BYLAWS.

COPIES OF THE CHX HOLDINGS' CERTIFICATE OF INCORPORATION AND BYLAWS, WHICH FURTHER DETAIL THESE LIMITATIONS, ARE AVAILABLE WITHOUT CHARGE UPON WRITTEN REQUEST TO CHX HOLDINGS.

I, _____, hereby request access to information underlying indications of interest (“Indications”) to purchase or sell shares of CHX Holdings common stock, which Indications are posted on CHX Holdings’ indication of interest board (the “I-Board”).

I hereby certify and represent the following:

- a. If making an Indication to purchase or sell CHX Holdings common stock, that I am able to make all representations required of me in order to consummate a transaction that results from any such Indication;
- b. I understand and agree that CHX Holdings common stock is subject to certain voting, transfer and ownership restrictions as delineated in the CHX Holdings Certificate of Incorporation and Bylaws and summarized on the cover of this Application and I affirmatively represent that any proposed transfer of shares will not be in violation of such restrictions; and
- c. I have read and understand the Access Agreement attached hereto as Exhibit A and have agreed to be bound by those requirements.

The undersigned agrees to be bound by all provisions contained in the Application and all related Indication Board operating policies and procedures outlined in the Notice to Shareholders dated February 18, 2005, including any amendments thereto.

Signature

Date

Print Name and Title

Please type or legibly print the required information:

Required Information:

Name of Person Requesting Access to Indications

Social Security Number or Taxpayer ID Number

Address

Telephone

Facsimile

E-mail Address

Name of Firm (*entity with which Applicant is affiliated*)

Firm Address

Firm Telephone

Firm Facsimile

Firm E-mail Address

List all firms and individuals that are either directly or indirectly affiliated with the Applicant and disclose any and all shares of CHX Holdings stock held by such affiliates.

