

**For filings with the FSA include the annex
For filings with issuer exclude the annex**

TR-1: Notifications of Major Interests in Shares

1. Identity of the issuer or the underlying issuer of existing shares to which voting rights are attached:	Cove Energy plc
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2. Reason for notification (yes/no)	
An acquisition or disposal of voting rights	No
An acquisition or disposal of financial instruments which may result in the acquisition of shares already issued to which voting rights are attached	No
An event changing the breakdown of voting rights	No
Other (please specify): <u>Change in shareholder's percentage of voting rights as a result of new issuance of 210,000,000 shares on the 06.10.09 by the company.</u>	Yes

3. Full name of person(s) subject to notification obligation:	W.W. Exploration Ltd.
4. Full name of shareholder(s) (if different from 3):	
5. Date of transaction (and date on which the threshold is crossed or reached if different):	06/10/2009 (date of issuance of shares by the Issuer)
6. Date on which issuer notified:	13/10/2009
7. Threshold(s) that is/are crossed or reached:	Below 3%

8: Notified Details

A: Voting rights attached to shares

Class/type of shares If possible use ISIN code	Situation previous to the triggering transaction		Resulting situation after the triggering transaction (After the new issuance of shares – 210m shares)				
	Number of shares	Number of voting rights	Number of shares	Number of voting rights		Percentage of voting rights	
				Direct	Indirect	Direct	Indirect
	7,833,333	7,833,333	7,833,333	7,833,333		2.92%	

B: Financial Instruments				
Resulting situation after the triggering transaction				
Type of financial instrument	Expiration date	Exercise/ conversion period/date	No. of voting rights that may be acquired (if the instrument exercised/converted)	Percentage of voting rights

Total (A+B)	
Number of voting rights	Percentage of voting rights
7,833,333	2.92%

9. Chain of controlled undertakings through which the voting rights and /or the financial instruments are effectively held, if applicable:

Proxy Voting:	
10. Name of proxy holder:	
11. Number of voting rights proxy holder will cease to hold:	
12. Date on which proxy holder will cease to hold voting rights:	

13. Additional information:	
14 Contact name:	Sarah Burke
15. Contact telephone number:	00 353 1 6333854

For notes on how to complete form TR-1 please see the FSA website.