

OGB -1A
INSTRUCTIONS

Read Carefully and Comply Fully

An application (in triplicate) shall be filed with the State Oil and Gas Board and approval obtained before reentry of a plugged and abandoned well begins. One copy will be returned following approval.

This application must be accompanied by:

- (1) \$300.00 permit fee, except for permits to amend (Payable to State Treasurer, State of Alabama)
- (2) Certified plat (triplicate)
- (3) Affidavit of Ownership or Control, Form OGB-2 (triplicate); or, Affidavit of Ownership or Control, Underground Injection Control, Form OGB-2C (triplicate), whichever is appropriate.
- (4) Bond (Single Well), Form OGB-3, or Bond (Blanket), Form OGB-4, if not on file with the Board
- (5) Organization report, Form OGB-5, if a current report is not on file with the Board
- (6) Form OGB-20, if a change of operator is involved

Make sure that you have given correctly all information requested. Much unnecessary correspondence will thus be avoided. **State Oil and Gas Board personnel will not make additions to or change any part of a notarized form.**

The certified plat shall show the location of the well within the section or block. If the well is being drilled on a unit greater than the 160-acre size specified in Rule 400-1-2-.02, the plat should also show the alternate unit. The plat shall show the direction of North and be drawn to the scale of one inch equals 1,000 feet. Show distances of the well from the nearest unit and section lines, and from the nearest wells in the same section completed in or drilling to the same reservoir. If this is a deviated well, show both surface and bottom hole locations on plat. The plat shall also indicate the location and status of all other wells that have been drilled in said section. For the purpose of designating the drilling or producing unit in which the well is located, the boundaries of such shall be shown on the plat.

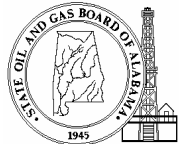
The permit number assigned to this well should always be used in correspondence relating to this well.

STATE OIL AND GAS BOARD OF ALABAMA

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420 Hackberry Lane
P.O. Box 869999

Tuscaloosa, Alabama 35486-6999
(205) 349-2852 Fax (205)349-2861
www.ogb.state.al.us



Permit number
01- _____ - _____
API number

Application to Reenter

Drill Complete in new zone Amend

(file in triplicate)

Name of operator _____ Date _____

Address _____ City _____ State _____ Zip _____

Well name and number _____ County _____

Well Location (give footage from nearest section or tract lines) Section-Township-Range or Tract
Latitude . Longitude .

Field (If wildcat, so state) _____ Reservoir _____

Describe drilling unit

Distance from proposed location to nearest unit line _____ feet Distance (if less than 5,280 feet) from proposed location to nearest permitted, drilling, or producible well in the same reservoir _____ feet

Proposed depth _____ Approx. date work will begin _____ Anticipated depth to base of fresh water (<10,000 mg/l TDS), if known _____ depth

Acres assigned to well _____ Elevation (ground) _____ Is the well on a unit greater than 160 acres in accordance with Rule 400-1-2-.02 ? Yes No (If yes, see below)

If yes, describe alternate unit in accordance with Rule 400-1-2-.02

Type bond Single well Amount of bond _____ Bonding company and bond number _____
 Blanket

Are the provisions of Rule 400-1-9-.02 or Rule 400-2-8-.04, Operations Involving Hydrogen Sulfide, applicable? Yes No
If yes, a Form OGB-24 shall be filed with this application.

Person to contact regarding permit application _____ Phone number _____
Fax number _____
E-Mail address _____

Remarks:

Executed this the _____ day of _____, 20 _____ Signature _____

Before me, the undersigned authority, on this day personally appeared _____ known to me to be the person whose name is subscribed to the above instrument, who being by me duly sworn on oath states that he/she is duly authorized to make the above report and that he/she has knowledge of the facts stated therein, and that said report is true and correct.

Subscribed and sworn to before me this _____ day of _____, 20 _____

SEAL My commission expires _____ Notary Public in and for _____ County, _____

ACTION OF STATE OIL AND GAS BOARD

APPROVED BY _____ DATE _____