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## MISSOURI DEPARTMENT OF NATURAL RESOURCES GEOLOGICAL SURVEY PROGRAM

FOR OFFICE USE ONLY				
BOND NUMBER	DATE RECEIVED			

OIL AND GAS WELL BOND					BOND NUMBER	₹	DATE RECE	DATE RECEIVED		
ΟВ	LIGOR (WELL	OWNER/OPERATOR) IN	NFORMATION							
NAM	E OF COMPANY, ORG	ANIZATION OR INDIVIDUAL					OPERATOR	LICENSE NUMBER		
MAILING ADDRESS				CITY			STATE	ZIP CODE		
PRIMARY CONTACT NAME TITLE			TITLE	PRIMARY PHONE NUMBER WITH AREA CODE EMAIL ADDRESS						
во	ND INFORMAT	ION								
	VIDUAL WELL BOND S	CHEDULE (REQUIRED BOND AMO		THE REQUIRE	D BOND AMOUN	T AND MAXIMUM	NUMBER OF SIMIL	RANGE AS INDICATED, ARLY CONSTRUCTED		
Well depth Bond amount				REGULATION			SED IN ACCORDANG AR DEPTH RANGE	CE WITH STATE MAY BE SECURED BY		
	0'-500' \$1,100			THIS BOND)						
	501'-1,000'	\$2,200		We	II depth	Bond amount	Maximum unplugged			
	1,001'-2,000'	\$3,300		0'-8	300'	\$22,000	40	weiis		
	2,001'-5,000'	\$4,400		801	'-1,500'	\$25,000	10			
	>5,000'	\$5,500 plus \$2 per foot b	eyond 5,001 feet			1				
BONI	D TYPE (CHOOSE EITH	HER INDIVIDUAL OR BLANKET WE	LL BOND AND COMPLETE INFORI	MATION TO R	GHT OF SELECTI	ION)				
	ndividual well bon	d Lease Name								
Well Number Propose								d Depth		
	or									
		Less than 800' depth		oth						
I L G	OINED DOIND / INICOINT	(I EN BONBING GONEBOLL LIGHT	-D760VL)							
FIN	ANCIAL ASSU	RANCE INSTRUMENT	(FAI) INFORMATION							
Fina	ancial assurance ir	nstrument previously submit	ted securing this bond \( \square\)	Yes □ N	o (If no, subn	nit FAI and FA	I form with this	form)		
Fina	ancial assurance ir	nstrument type	ate of Deposit	ble Surety	Bond 🗌 Irr	evocable Lette	er of Credit			
FINANCIAL ASSURANCE INSTRUMENT NUMBER					FINANCIAL ASSURANCE INSTRUMENT VALUE					
				\$						
CE	RTIFICATION									
I, th∉	<ul><li>I confirm the</li><li>I understane</li><li>I understane</li><li>I acknowled</li><li>I understane</li></ul>	rtify that: ized to act on behalf of the ce e information on this form ha d this bond is not transferral d that if information on this f lge this is a performance bo d this bond shall remain in f with the provisions of Chap	as been reviewed by me and ble. orm changes it must be res and and the required bond a ull force and effect until a le	d is true, co ubmitted. mount is pa tter of relea	ayable to the s	state of Missou by the state geo	ıri. ologist or it is fo	rfeited due to non-		
PRIN	IT NAME		TITLE			COMPANY				
SIGNATURE						DATE				
<b>F</b> 0	D 055105 U05	ON V								
	R OFFICE USE	ONLY					DATE			
, U F F							DATE			
APPROVAL OF RELEASE/FORFEITURE OF BOND  BOND NUMBER  Financial Action  Release  Forfeiture				BOND AMOUNT PLE			PLEDGED FAI NU	JMBER		
AUTH	HORITY TO RELEASE/	FORFEIT THIS BOND IS HEREBY G	RANTED, APPROVED BY				1			
THIS		DAY OF YEAR								