

STATE OF WYOMING

OIL AND GAS CONSERVATION COMMISSION

P. O. Box 2640

Casper Wyoming 82602

API #: _____

Split Estate		
Yes	No	If Split Estate, provide the Form 1A.
<input type="checkbox"/>	<input type="checkbox"/>	

Fee lands, submit original.

Federal lands, submit sundry only.

State lands, submit original & 1 copy.

DESIGNATION OF AGENT OR OPERATOR

Lessee of record designating
new operator (State wells)

Owner designating a new operator

The undersigned is, on record, the holder of oil and/ or gas well/ lease:

WELL NAME AND NUMBER: _____

STATE LANDS LEASE NUMBER: _____

and hereby designates:

NAME: _____

ADDRESS: _____

as his agent-operator, with full authority to act in his behalf in complying with the terms of the lease and regulations applicable thereto and on whom the Oil and Gas Supervisor or his representative may serve written or oral instructions in securing compliance with the Rules and Regulations and Rules of Practice and Procedure of the Oil and Gas Conservation Commission of the State of Wyoming with respect to (describe acreage to which this designation is applicable which should include 1/4, 1/4, section, township, range and County):

It is understood that this designation of agent-operator does not relieve the owner/ lessee of responsibility for compliance with the terms of the lease and the Rules and Regulations and Rules of Practice and Procedure of the Oil and Gas Conservation Commission of the State of Wyoming. It is understood this designation of operator or agent does not constitute an assignment of any interest in the lease.

In case of default on the part of the designated agent-operator the owner/ lessee will make full and prompt compliance with all regulations, lease terms or orders of the Oil and Gas Conservation Commission of the State of Wyoming or its authorized representative.

Operator Bond Amount: _____

Bond Number: _____

Surety: _____

The owner/lesse agrees to promptly notify the Oil and Gas Supervisor of any change in this designation.

Effective Date of Designation: _____

Owner's Company: _____

New Agent/ Operator's Name: _____

Address: _____

Address: _____

Signature: _____

Signature: _____

Title: _____

Title: _____