



ARKANSAS OIL AND GAS COMMISSION

Submit Form To: El Dorado Regional Office P. O. Box 11510 El Dorado, Arkansas 71730

FORM 19 APPLICATION FOR PERMIT TO CONDUCT SEISMIC OPERATIONS

(This Application must be accompanied by a \$500.00 application fee and financial assurance in form and amount as required by the Commission)

Date _____ 20, _____

Name of Applicant: _____

Send Permit to: Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ E-Mail _____

Indicate principal business address of Applicant if different than above: _____

Location of area within which Applicant proposes to conduct field seismic activities: _____

County or Counties: _____

Number of lines to be shot: _____

With respect to each such line indicate the Section, Township and Range of the proposed point of beginning and the projected termination thereof for each line or lines which Applicant proposes to shoot and the general direction in which each such line shall be run:

(Each such seismic line should be separately described in the manner set forth above. Additional sheets may be attached if necessary to describe the same. Applicant must attach an area plat or topographic map depicting each such line for which this Application is filed.)

Applicant's designated agent for service of process in the State of Arkansas is: _____

Proposed depth of shot holes: _____

Type of explosive to be utilized: _____

Normal charge expressed in pounds: _____

Distance between shot holes: _____

Name, address and telephone number of on-site party manager or crew chief in charge of operations: _____

Proposed date of: _____

Commencement _____ Completion _____

Name and address of geophysical company for which such work is to be performed: _____

The undersigned Applicant acknowledges by the execution hereof that this Application is filed for purposes of conforming with the requirements in Ark. Code Ann. (1987) §15-71-114, and that any operation which Applicant herein is granted a permit to perform shall be subject to and in conformity with the provisions of said Act and all rules, regulations and orders of the Arkansas Oil and Gas Commission applicable thereto.

Applicant further agrees that no entry shall be made by any person or entity upon the lands upon which such seismic operations are to be conducted without the person or entity having first given notice as provided in General Rule B-42.

CERTIFICATE

I declare under the penalties of perjury that this report has been examined by me and to the best of my knowledge is true, correct and complete.

By: _____ Date _____

Applicant

Date

Clearly Printed Name

INSTRUCTIONS

1. This form must be completed in its entirety, properly signed and exhibits attached for each request for a permit to conduct seismic operations.
2. Applicant must be properly registered with the Arkansas Secretary of State's office and the Arkansas Oil and Gas Commission.
3. Each applicant shall identify the area of intended operations for which the application is filed on a topographic map or plat acceptable to the Commission.
4. Applicant's designated agent shall be that which is registered with the Arkansas Secretary of State.
5. 24 hour contact information shall be submitted for the person(s) on site responsible for field operations.