ARKANSAS
OIL AND GAS
COMMISSION

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

FORM 16 - Sheet A
RECEIPTS BY FIELD, BY LEASES

Report of _____

Address _____

Field or Pool	Name of Producer	Lease Name	Tank No.	Barrels
			TOTAL	**-**

For Instructions See Form 16

Revised 04/09