

## ARKANSAS OIL AND GAS COMMISSION

## FORM 10 - Sheet 2 REFINER'S MONTHLY REPORT

Report of		For the Month of			, 20
Main Office					
Address		City		State Zip	
Contact Person	_E-Mail		Phone	Fax	
Plant					
Address		City		_StateZip	
Contact Person	_E-Mail		Phone	Fax	

## **Detail Statement of All Receipts Into Plant**

(Barrels of 42 U.S. Gallons)

					Other			
From Whom	Crude Oil	Casinghead Gasoline	Kerosene	Stock for Cracking	Barrels	Kind		
TOTAL	-	-	-	-	-			
GRAND TOTAL ALL RECEIPTS - BBLS								

## 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.

Signature

Typed or Clearly Printed Name