

Type or Clearly Print Name

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

FORM 32 REQUEST FOR EXPLORATION AND PRODUCTION FLUID TRANSPORTATION SYSTEM PERMIT

	Purpose of Fili	ng:	Initial Application	n 🗌 Amer	ndment 🗌 I	Renewal	
	If Amendment	or Renewal, list F	Permit Number:				
A.	Transporters Name:						
	Address:						
	City:					Zip:	
	Person responsible for operation:					: <u> </u>	
В.	Address of Arkansas location:						
	City:					Zip:	
	Person responsible for operation:					ne No:	
	Address of Arkansas location:						
	City:					Zip:	
	Person responsible for operation:				24 hr Pho	ne No:	
C.	List all information fo	r Transportation	Tank(s)				
	Description	Size (bbls)	Serial No.	License No.	Location	Owned	Leased
	·	,					
	I declare under the pena			ERTIFICATE examined by me and to the	e best of my knowledge is tru		complete.
	Signature					Date	

INSTRUCTIONS

- 1. This form is to be filed in accordance with Commission Rule E-3.
- 2. Complete Section A. This should match that which is submitted on the Organization Report (AOGC Form 1).
- 3. Complete Section B for each Yard (location where transporter's equipment is stored) located in Arkansas. Attach additional sheet if more than two yards.
- 4. Complete Section C describing each transportation tank whether attached (vaccum tank) or pulled (transport trailer) and where located (yard). Attach additional sheet if necessary.
- 5. Attach check for One Hundred Dollars (\$100) for each transportation tank listed in Section C and submit to the El Dorado Regional Office.