## AFFIDAVIT OF NON-DRILLING FOR CBM, OIL, AND GAS WELLS

## KNOW ALL PERSONS BY THESE PRESENTS:

| That   | , whose address is  |
|--|---|
| (Person and Operator )                             | , being first duly sworn, on his oath   |
| states that he is familiar with the following desc |   |
|  | an 15 wells per page, No Attachments )  |
| API Well Name                                      | <sup>1</sup> / <sub>4</sub> - <sup>1</sup> / <sub>4</sub> Sec. Township Range |
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| And further states that no well or wells were dr   | rilled, or locations constructed for wells in search                          |
|  | ove-described lands or locations or lands pooled                              |
| <del>-</del>                                       | , and that he knows that the facts, as  |
| stated herein, are true.                           |   |
|  |   |
| Further, AFFIANT SAYETH NOT.                       |   |
| Executed thisday of                                | 20  |
| Executed thisday of                                |   |
|  |   |
|  |   |
| Signature of Operator                              | Title   |
|  |   |
| ACKNOWL  | EDGEMENT  |
| STATE)   |   |
| ) ss.  |   |
| COUNTY)  |   |
|  |   |
| On this day of                                     | , 20, before me personally came   |
| , to me known to be t                              | he person described herein and who executed the                               |
| same, as its free act and deed.                    |   |
| N. G   |   |
| My Commission Expires:                             |   |
|  |   |
| No   | stary Public  |
| 110  | j 110   |