

ARKANSAS OIL AND GAS COMMISSION

FORM 5 APPLICATION FOR ADMINISTRATIVE LOCATION EXCEPTION

Submit an original and one copy with \$500 filing fee.

Operator				Conta	act Per	son						
Address				City			s	tate		Zip		
Phone		Fax E-Mail										
Well Name & No.								County:	County:			
Field			Field Rule No.					Sec	Twp		Rge	
Proposed Surface Hole Location:												
Proposed Bottom Hole Location (directional well only):												
Descripton of Drilling Unit:												
Proposed Depth of Well & Deepest Formation:												
If geologic, attach isopach and structure map. If topographic, attach topographic map. If other, give explanation and attach supporting documentation.												
Will the proceeds from the proposed well be shared with another drilling unit: YES NO If yes, complete the following:												
Affected Units Information												
Location of affected Drilling Uni	ts and % alloca	ted to each	n:			I						
Drilling Unit	Sec	Т	R	%		Drilling Unit		Sec	Т	R	%	
Drilling Unit	Sec	Т	R	%		Drilling Unit					%	
Drilling Unit	Sec	Т	R	%		Drilling Unit					%	
The following boxes must be checked as true and correct in order for this application to be approved: The affected drilling units have been previously integrated (whether voluntarily formed or by Commission Order) and are held by production. Written authorization from each owner as defined in A.C.A. 15-72-102(9), in each of the affected drilling units is attached. A plat showing area allocated to each drilling unit, calculated in accordance with General Rule B-40(c) is attached.												

CERTIFICATE

I hereby certify that I am authorized to submit this application, which was prepared by me or under my supervision. The facts and proposals made herein are true, correct and complete to the best of my knowledge and belief.

Signature	Title	Date
For staff use only:		
APPROVED: Yes No	Signature	Date
Approved Allowable:	Gignature	Date

See instructions on reverse side.

INSTRUCTIONS

This form may be submitted for an exceptional well location request that conforms with General Rule B-40.

Complete all sections, sign, date and submit an original and one copy of this form with all attachments and application fee.