



**ARKANSAS  
OIL AND GAS  
COMMISSION**

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

**FORM 25**

**APPLICATION FOR WELLS THAT ENCROACH ON OR CROSS DRILLING UNIT BOUNDARIES AS  
AUTHORIZED BY GENERAL RULES B-43 and B-44**

Operator Information			
Operator		Contact Person	
Address		City	State
Phone		Fax	E-Mail
		Zip	

Well Information				
Well Name & No.	Sec	T	R	County:
Proposed Surface Hole Location:				
Proposed Bottom Hole Location:				
Proposed Depth of Well & Deepest Formation:				

Affected Units Information											
Location of affected Drilling Units and % allocated to each:											
Drilling Unit	Sec	T	R	%		Drilling Unit	Sec	T	R	%	
Drilling Unit	Sec	T	R	%		Drilling Unit	Sec	T	R	%	
Drilling Unit	Sec	T	R	%		Drilling Unit	Sec	T	R	%	

The following boxes must be checked as true and correct in order for this application to be approved:

- The affected drilling units all currently integrated or are 100% leased.
- The majority of the working interest owners in each affected drilling unit have agreed to share costs and proceeds of production for the well.
- A list of name and address of each owner in each affected drilling unit is attached to the application.
- An affidavit verifying the mailing of notice of the application to all applicable owners is attached.
- A plat showing area allocated to each drilling unit, calculated in accordance with General Rule B-43(o) or B-44(p) is attached.
- Detailed plat map(s) indicating current well locations and future well development plans in all included drilling units is attached.
- Include a \$500.00 application fee.

Remarks:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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

## **INSTRUCTIONS**

1. This form is to be submitted in conjunction with an "Intent to Drill" (Form 2), is for an exceptional well location request for a well that will encroach upon or cross a drilling unit boundaries and conforms with General Rules B-43 or B-44.
2. Application can not be approved until 15 days from the date the Commission receives the application.
3. Upon receipt of the drilling permit, written notice must be provided to all working interest owners that the permit has been received. The working interest owners will have 15 days from receipt of notice to make election.
4. Complete all sections, sign, date and submit an original and one copy of this form with all attachments and application fee.