

**Instructions:**

File original and one (1) copy of application with proof of publication.  
Type or print using black ink only.

**OKLAHOMA CORPORATION COMMISSION**

Oil & Gas Conservation Division  
Post Office Box 52000  
Oklahoma City, Oklahoma 73152-2000

Form 1055  
Rev. 2008

**Application for Pipe Pulling and Well Plugging License**  
OAC 165:10-11-1

Name		Phone (AC)
Address (if PO Box, include street address)		FAX No.
Address		
City	State	Zip

**Partnership** Name and complete address of each partner


**Corporation** Name and complete address of each director and officer


**Experience**


Net worth of applicant is in excess of \$ \_\_\_\_\_ (Financial Statement optional)

**Applicant's Equipment** Condition of equipment  New  Good  Fair

No. of pulling units and/or cementing pump trucks to be used in operations \_\_\_\_\_ Pulling Units \_\_\_\_\_ Cementing pump trucks

Equipment max. depth capacity	ft.	Max. casing pulling size	Max. hydraulic pipe pulling	lb/ft	Hydraulic jacks for casing pulling	<input type="checkbox"/> yes <input type="checkbox"/> no
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General operational insurance coverage carried for above type of work Company \_\_\_\_\_ Amount \_\_\_\_\_

Counties in which company intends to engage in pipe pulling and well plugging operations, (attach sheet if necessary); or

Check here if application is for statewide operations.

1	5	9
2	6	10
3	7	11
4	8	12

**References, two (2) names and addresses**


Attach rate schedules for plugging and casing pullers.

I declare that I have knowledge of the contents of this application and am authorized by my organization to make this report, which was prepared by me or under my supervision and direction, with the data and facts stated herein to be true, correct and complete to the best of my knowledge and belief.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Name & Title (Typed or Printed) \_\_\_\_\_

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