OIL AND GAS CONSERVATION DIVISION P.O. Box 52000 Oklahoma City, OK 73152-2000 405-521-2331 ogadmin@occ.ok.gov



Form 1006BR-A (Rev 2020)

(TYPE OR PRINT USING BLACK INK)

OCC/OTC No.				
		REEMENT TO CLOS 10-8-1, 165:10-8-2, 165:10-9		7
KNOW ALL MEN BY	THESE PRESENTS:			
That	(Name of the Operator, Compa			, as Operator,
	(Name of the Operator, Compa	ny or maividuai)		
Physical Address:	(All Operators <u>MUST</u> include a Physical Address)		Post Office Box Number:	
(A	all Operators MUST include a Physical Add	ress)		
Phone ()	City		_ State	Zip
Contact Person:		Email Address:		
Emergency Information	Contact Person:		Phon	e ()
Oklahoma and the Gener	rdance with closure plan at the ral Rules and Special Orders of the tates that he has met the requirem	e Corporation Commiss	ion of the Stat	e of Oklahoma.
time and in the manner Corporation Commission Commission, a sum equa	prescribed by the laws of the State of Oklahoma, the all to the cost of plugging the well use the facility to be closed.	tte of Oklahoma and the operator will forthwite	e General Ru h forfeit or p	les and Special Orders of the bay to the State, through the
Dated this day of	of, 20			
		Print or T	ype Name of Ope	rator
Federal Employers Identification	Number:			

PLEASE ATTACH IMPRINT OF OKLAHOMA CORPORATE SEAL. IF A CORPORATION PLEASE ATTACH A COPY OF THE OKLAHOMA SECRETARY OF STATE DOMESTICATION CERTIFICATE.

Signature of Operator, Partner, or Principal

Social Security Number: _____

Office of Operator