

OPERATOR'S AGREEMENT TO CLOSE AND RECLAIM A COMMERCIAL SOIL FARM
OAC 165:10-9-2

(TYPE OR PRINT IN BLACK OR BLUE INK)

***Operator Number:** _____

KNOW ALL MEN BY THESE PRESENTS:

***Name of Operator:** _____

***Operator Mailing Address:** _____ ***City:** _____ ***State:** _____ ***Zip:** _____

***Operator Physical Address:** _____ ***City:** _____ ***State:** _____ ***Zip:** _____

***Operator Contact Person:** _____ ***Telephone Number:** _____

***Operator Email Address:** _____

*** Operator Emergency Contact Name:** _____ ***Emergency Contact Phone Number:** _____

authorized to do business within the State of Oklahoma, proposes to operate a commercial soil farm within the State of Oklahoma at the legal location listed below, and hereby agrees to close the commercial soil farm and reclaim the site at the time and in the manner prescribed by the laws of the State of Oklahoma and the General Rules and Regulations and Special Orders of the Corporation Commission of the State of Oklahoma.

***Land covered under this agreement is as follows:**

***Quarters:** _____ ***Section:** _____ ***Township:** _____ ***Range:** _____ ***County:** _____

***Latitude:** _____ ***Longitude:** _____ ***Order Number Authorizing Operation:** _____

The operator hereby states that it has posted a valid surety instrument with the Commission to guarantee the faithful performance of this agreement. If the Commission finds that the above-mentioned operator has failed or refused to comply with the rules or take remedial action as required by law, the surety shall pay to the Commission the full amount of the operator's obligation up to the limit of the surety.

I declare and state that I have personal knowledge of the contents of this Operator's Agreement to close and reclaim a commercial soil farm within the State of Oklahoma, 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. Any person who shall verify under oath any report, map or drawing or other statement or document authorized or required by the provisions of this act (52 O.S. § 109) or by any order, rule or regulation of the Commission made under the provisions of this act to be filed with the Commission or with the Secretary of the Commission, or with any other officer, and who files or causes the same to be filed with the Secretary of the Commission or other officer, which states or contains any material matter which he knows to be false is guilty of perjury and upon conviction thereof shall be punished by imprisonment in the State Penitentiary for not less than two (2) years, nor more than ten (10) years.

***Dated this** _____ **day of** _____, 20____.

Tax ID: _____

***Federal Employer Identification Number, SSN, EIN, etc.** _____

***Signature of Officer, Director, Partner, or Principal**

***Printed Name of Officer, Director, Partner, or Principal of Operator**