



# APPLICATION FOR PRODUCTION SHARING AGREEMENT

To allow horizontal wells to cross lease lines

Date: \_\_\_\_\_

Please TYPE or print LEGIBLY

	<u>Company Name &amp; Address</u>		<u>Contact Person</u>
<b>APPLICANT/ OPERATOR:</b>	_____	Attn:	_____
	_____	Phone:	_____
	_____	Email:	_____

Well Name & #: \_\_\_\_\_

Before issuance of an Agreement, the following must be received by University Lands:

1. This completed application and payment
2. Letter confirming that all parties owning a working interest are knowledgeable of the intent to drill across lease lines and will ratify the agreement.
3. Hard copy Plat showing outline of proposed unit that clearly identifies the leases involved, University lease numbers, block & section numbers, proposed unit well location, all wells (with their productive depths/intervals listed) located within the leases involved. Be prepared to email a JPG version when requested.
4. If a PSA is being requested to cross University Lands lease(s) and private fee lease(s), we also require a copy of the private fee lease contract(s)

PSA Application Fee: \$ 500.00

Make check payable to: THE UNIVERSITY OF TEXAS SYSTEM

Mail to: University Lands  
PO Box 553  
Midland TX 79702-0553

Contact: Land Department  
(432) 684-4404

**University Lands PSA  
Application**

Date: \_\_\_\_\_

Well Name: \_\_\_\_\_

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Estimated spud date: \_\_\_\_\_ Estimated completion date: \_\_\_\_\_

Depths ( Proposed  Actual): True Vertical Depth: \_\_\_\_\_ feet Measured Depth: \_\_\_\_\_ feet

Formation: \_\_\_\_\_ Stratigraphic equivalent, top: \_\_\_\_\_ ft bottom: \_\_\_\_\_ ft

Location of Well (Legal description):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contract Signatory's Name: \_\_\_\_\_ Title \_\_\_\_\_

Type of Company (e.g. Delaware Corp, Texas Corp,  
Limited Liability Partnership, etc.): \_\_\_\_\_

Applicant represents that the information presented in this application is true and correct and acknowledges that this information will be relied upon to make decisions affecting the Permanent University Fund's oil and gas assets. If any information presented herein changes before the state executes any agreement resulting from this application, applicant acknowledges its duty to inform University Lands' staff of such changes in writing as soon as possible.

Company Rep's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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For University Lands Land Department Use Only

**AGREEMENT No. & NAME:** \_\_\_\_\_

Approved  Not Approved

Name & Date: \_\_\_\_\_

### Subject Leases

<b>UL Lease #</b>	<b>Lease Status</b>	<b>Royalty Rate (Percentage)</b>	<b>Lease Description</b> <i>(portion of Section #, Block #, any depth restrictions, University Land Survey, County(ies), Texas)</i>	<b>Acres In Lease</b>	<b>Acres In PSA</b>	<b>Lessee(s) Of Record</b>	<b>Date</b>	<b>Recorded Info</b>