

OFF LEASE DRILL SITE LEASE APPLICATION

Date of Application: _____

Name on Contract: _____
(Company or Operator Name)

Contact Person: _____

Address: _____

City, State, Zip: _____

E-Mail: _____

Telephone #: _____

Cell Number: _____

Effective Date: _____
(Always 1st day of the Month)

Size in Acres: _____

Cnty, Blk, Sec, Qtr: _____

API of each well on lease: _____

Names of each well on lease: _____

UL O&G Leases from which wells on pad produce from: _____

Approved by University Lands Field Representative: Yes No

University Lands Field Rep Name: _____ Date: _____

REQUIREMENTS:

1. Digital Surveyed Plat: .shp – Shapefile or .dwg – Auto Cad or any other GIS data format.
2. Survey Plat: .pdf - Adobe Acrobat for the Contract Exhibit "A".

Upon receipt by University Lands of this completed data sheet and surveyed plat of proposed area, lease contracts will be typed and mailed to you for execution. The fees will be due when the contracts are submitted to University Lands. If the contracts need to be mailed to a different address than listed above please indicate below:

Company Name: _____

Contact Name: _____

Address: _____

E-Mail: _____

Cell Number: _____