STATE OF ALASKA ALASKA OIL AND GAS CONSERVATION COMMISSION

SURETY BOND

BOND NUMBER	PENAL SUM \$	
****		CENTER C
	OW ALL PERSONS BY THESE PRES	•
That we,		,
	_, State of	
	, as surety, an	
•	is in good standing, are held firmly bo	
Conservation Commission in t	he penal sum as indicated above, law	ful money of the United States of
	vell and truly to be made, we bind our	
our heirs, executors, administ	rators, successors, and assigns, jointly	ly and severally, firmly by these
presents.		
WHEREAS the above bounde	n principal proposes to engage in the	drilling or operating of a well or
wells subject to regulation by t	he Alaska Oil and Gas Conservation C	Commission at a location described
as follows:		
☐ SINGLE WELL BOND	1 ' '	` _
	by the Commission under 20 AA	AC 25.025(b))
Unit or Lease Name	Well Number	Area of State
Surface Well Location - Sec	c., Twp., Rng. and Mer.	
Surface Well Location - Al	aska State Plane Coordinate System co	ordinates
☐ BLANKET BOND	- minimum penal sum \$200,000	
Any and all wells drilled or	operated by the principal in the State o	
Any and an wens diffied of	operated by the principal in the state of	n maska.

NOW, THEREFORE, the above bounden principal shall comply with all of the provisions of the laws of the State of Alaska and the regulations, rules, and orders of the Alaska Oil and Gas Conservation Commission in the drilling, operation, maintenance, repair, and abandonment of each well and the clearance of each location, and shall file with the Alaska Oil and Gas Conservation Commission all notices and records required by said Commission.

BOND NUMBER	(continued) PENAL SUM \$
This obligation shall remain in full force and conservation Commission in accordance with	effect until released by the Alaska Oil and Gas a 20 AAC 25.025(c).
Witness our hand and seal this	day of
Principal (Operator)	By: Signature (attach Power of Attorney or other evidence of authority of person signing)
	Printed name and title
Witness our hand and seal this	day of
	By:
Surety	Signature
	Printed name and title
	Timed hame and title
C .	(Resident Agent if necessary) MATION / ALASKA CONTACT INFORMATION
PRINCIPAL BUSINESS CONTACT INFOR Name:	(Resident Agent if necessary) MATION / ALASKA CONTACT INFORMATION Name:
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