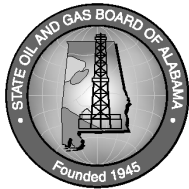


STATE OIL AND GAS BOARD OF ALABAMA



Application for Permit to Directionally Drill

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Permit Number (To be filled in by Board) API Number

Form OGB-1B, Rev. 07/13  
(File in triplicate)

Drill      Deepen      Recomplete      Sidetrack      Convert      Amend

Name of Operator \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

1. Well name and number		2. County	
3. Well Location (proposed surface)	(give footage from nearest section or offshore tract line		Section-Township-Range or Tract
	Latitude (NAD27)      ■	Longitude (NAD27)      ■	
4. Well Location (proposed bottom hole)	(give footage from nearest section or offshore tract lines)		Section-Township-Range or Tract
	Latitude (NAD27)      ■	Longitude (NAD27)      ■	
5. Field (If wildcat, so state)		6. Target Reservoir	
7. Unit assigned to well			
8. Distance from proposed location to nearest unit line*      feet		9. Distance (if less than 5,280 feet) from proposed location to nearest permitted, drilling, or producible well in same reservoir      feet	
10. Proposed depth	11. Approximate date work will begin	12. Anticipated depth to base of fresh water (<10,000 mg/L TDS), if known      subsea depth	
13. Acres assigned to well	14. Elevation (ground)	15. Is an alternate unit required in accordance with the applicable spacing rule?      Yes      No (If yes, see no. 16 below)	
16. If yes, describe alternate unit in accordance with applicable rule			
17. Type of bond	Single Well      Amount of bond	18. Bonding company and bond number	
19. Are the provisions of Rule 400-1-9-.02 or Rule 400-2-8-.04, Operations Involving Hydrogen Sulfide, applicable?      Yes      No If yes, a Form OGB-24 shall be filed with this application.			
20. Person to contact regarding this application		Phone Number	
		Fax Number	
		E-mail Address	

Remarks:

\* Closest distance from proposed wellbore within target reservoir to nearest unit line

Executed this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
Signature \_\_\_\_\_

Before me, the undersigned authority, on this day personally appeared \_\_\_\_\_ known to me to be the person whose name is subscribed to the above instrument, who being by me duly sworn on oath states that he/she is duly authorized to make the above report and that he/she has knowledge of the facts stated therein, and that said report is true and correct.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

SEAL  
My commission expires \_\_\_\_\_

Notary Public in and for \_\_\_\_\_  
County, \_\_\_\_\_

ACTION OF STATE OIL AND GAS BOARD

APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_