

Instructions:

File original and one (1) copy of application with proof of publications.

Include \$100 filing fee.

OKLAHOMA CORPORATION COMMISSION

Oil & Gas Conservation Division
Post Office Box 52000
Oklahoma City, Oklahoma 73152-2000

Form 1055

Rev. 2018

Type or print using black ink only.

Application for Pipe Pulling and Well Plugging License

OAC 165:10-11-1

Applicant

Name		Phone (AC)
Address (if PO Box, include street address on Line 2 below)		FAX No.
Address Line 2		
City	State	Zip

Partnership Name and complete address of each partner (if additional space is needed, please list on a separate sheet)

Corporation Name and complete address of each director and officer (if additional space is needed, please list on a separate sheet)

Experience (if additional space is needed, please list on a separate sheet)

Net worth of applicant is in excess of \$ _____ (Financial Statement optional)

Applicant's Equipment Condition of equipment New Good Fair

No. of pulling units and/or cementing pump trucks to be used in operations: _____ Pulling Units _____ Cementing pump trucks

Equipment max. depth capacity (ft.)	Max. casing pulling size	Max. hydraulic pipe pulling (lb/ft.)	Hydraulic jacks for casing pulling <input type="checkbox"/> yes <input type="checkbox"/> no
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General operational insurance coverage carried for above type of work: Company _____ Amount _____

Counties in which company intends to engage in pipe pulling and well plugging operations, (attach sheet if necessary); or

Check here if application is for statewide operations.

1	5	9
2	6	10
3	7	11
4	8	12

References: two (2) names and addresses

Attach rate schedules for plugging and casing pullers.

Are you an honorably-discharged member of the Armed Forces? Yes No
If "yes", please attach a copy of your DD Form 214.

Are you an active-duty member of the Armed Forces of any state? Yes No
If "yes", please attach a copy of your active duty ID card.

Is your spouse an active-duty member of the Armed Forces of any state? Yes No
If "yes", please attach a copy of your dependent ID card.

Is your spouse subject to a military transfer to this state? Yes No
If "yes", please provide a copy of the transfer papers.

Did you leave employment in another state to accompany your spouse to this state? Yes No

Are you certified or licensed in another state to perform pipe pulling and well plugging? Yes No
If "yes", please attach a copy of your license.

I declare that I have knowledge of the contents of this application and am authorized by my organization to make this report, 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.

Signature

Date

Name & Title (Typed or Printed)

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115 West 6th Street
Bristow, OK 74010
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