APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)

OPERATOR NAME: __________________________
OPERATOR ADDRESS: _______________________
APPLICATION TYPE: _______________________

☐ Pool Commingling ☐ Lease Commingling ☐ Pool and Lease Commingling ☐ Off-Lease Storage and Measurement (Only if not Surface Commingled)

LEASE TYPE: ☐ Fee ☐ State ☐ Federal

Is this an Amendment to existing Order? ☐ Yes ☐ No If “Yes”, please include the appropriate Order No. _____________________

Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling? ☐ Yes ☐ No

(A) POOL COMMINGLING

Please attach sheets with the following information

<table>
<thead>
<tr>
<th>Pool Names and Codes</th>
<th>Gravities / BTU of Non-Commingled Production</th>
<th>Calculated Gravities / BTU of Commingled Production</th>
<th>Calculated Value of Commingled Production</th>
<th>Volumes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(2) Are any wells producing at top allowables? ☐ Yes ☐ No
(3) Has all interest owners been notified by certified mail of the proposed commingling? ☐ Yes ☐ No.
(4) Measurement type: ☐ Metering ☐ Other (Specify)
(5) Will commingling decrease the value of production? ☐ Yes ☐ No If “yes”, describe why commingling should be approved

(B) LEASE COMMINGLING

Please attach sheets with the following information

<table>
<thead>
<tr>
<th>Pool Name and Code</th>
<th>Is all production from same source of supply? ☐ Yes ☐ No</th>
<th>Has all interest owners been notified by certified mail of the proposed commingling? ☐ Yes ☐ No</th>
<th>Measurement type: ☐ Metering ☐ Other (Specify)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(C) POOL and LEASE COMMINGLING

Please attach sheets with the following information

(1) Complete Sections A and E.

(D) OFF-LEASE STORAGE and MEASUREMENT

Please attached sheets with the following information

(1) Is all production from same source of supply? ☐ Yes ☐ No
(2) Include proof of notice to all interest owners.

(E) ADDITIONAL INFORMATION (for all application types)

Please attach sheets with the following information

(1) A schematic diagram of facility, including legal location.
(2) A plat with lease boundaries showing all well and facility locations. Include lease numbers if Federal or State lands are involved.
(3) Lease Names, Lease and Well Numbers, and API Numbers.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE: ___________________________________ TITLE: ___________________________________ DATE: _______________________

TYPE OR PRINT NAME: __________________________ TELEPHONE NO.: __________________________

E-MAIL ADDRESS: _____________________________________________