



Texas General Land Office
 George P. Bush, Commissioner
 1700 North Congress Avenue
 Austin, Texas 78701-1495

GLO USE ONLY
MF- _____
UNIT _____

APPLICATION FOR POOLING UNLEASED STATE RIGHT OF WAY

COUNTY _____ **BONUS: \$** _____ **PROCESSING FEE: \$ 500.00**
 (List only one county) (Bonus & Processing fee payable to: Commission of Texas General Land Office)

APPLICANT INFORMATION

Name: _____ Phone: _____

Mailing Address: _____

Representative: _____ Phone: _____

Is SROW on Relinquishment Act Lands? YES NO

Name of SROW Being Pooled: _____

Total SROW Acres in Unit: _____ Highest Bonus Per Acre Paid in Unit: \$ _____

State Royalty: _____ Name of Proposed Unit: _____

Operator of Proposed Unit: _____ Operator TAX ID # _____

STATE RIGHT OF WAY TO BE POOLED		
SROW Name	Royalty	SROW Acreage in Unit

Existing State/County Leases in Unit						
Road Name	State Lease Number (MF)	Lease Date	Lease Term	Lease Royalty	Total Lease Acreage	Lease Acreage in Unit

Total State Acreage in Unit _____ Ac.

Total Private Acreage in Unit _____ Ac.

Total Acreage in Proposed Unit _____ Ac.

State Mineral Ownership: 100% Other (If other, attach sheet showing net acreage/tract calculations)

Total State Tract Participation in Unit (St. Ac./Unit Ac.= Decimal Int.): _____

Total State Royalty Participation in Unit (St. Roy. Decimal X Tr. Part. Int. = St. Roy.): _____

Effective Date of Pooling Agreement: _____ Date of First Production (if applicable): _____

Participation from Date of First Production: Yes No/Explain: _____

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Minerals to be Pooled: Oil Gas Oil & Gas

Depths to be Pooled: The pooled mineral shall extend to those depths underlying the surface boundaries of the pooled unit from _____

To _____

List the well name, type of log and API# if the depths of pool interval are a correlative equivalent from a specific well log: _____

OR

Provide a copy of the proposed Designation of Unit and highlight the depth interval to be pooled as shown in said Designation.

◆ Attach a plat showing the proposed unit outline, proposed unit well location, state lease numbers (MF#) of any other state leases within the unit outline ◆

UNIT WELL(S)

Proposed Spud Date: _____

Actual Spud Date(s): _____

Proposed Total Depth: _____

Primary Formation Objective: _____

Actual Total Depth(s): _____

Completion Date: _____ Date of First Production: _____

District: _____ RRC ID# _____

API #: _____ API #: _____

API #: _____ API #: _____

API #: _____ API #: _____

Well Name(s): _____