

BLANKET SURETY BOND

State Form 12494 (R3 / 12-17) / Form No. B2

INDIANA DEPARTMENT OF NATURAL RESOURCES

Division of Oil and Gas 402 W. Washington St., Rm. 293 Indianapolis, IN 46204 Telephone number: (317) 232-4055

FAX number: (317 232-1550 Internet: http://www.in.gov/dnr/dnroil

Bond number				
Purpose	er Replacement			
FOR DIVISION USE ONLY				
Date filed (month, day, year)	Date released (month, day, year)			
Ву	Ву			

(I) (We)	of the city of	, county of	, State
of	, as Principal and	as Surety are held and fi	rmly bound
unto the	State of Indiana in the sum of Forty-Five Thousand D	ollars (\$45,000) upon the terms set forth in	this Blanket
Suretv B	Bond (the "Bond"):		

- The Bond applies to a well drilled, deepened, converted, or operated for oil and gas purposes for which the Principal has acquired a permit under IC 14-37.
- 2. The purpose of the Bond is to provide for compliance with IC 14-37 with respect to the plugging of all wells, the filling in of all excavations, the removal of all concrete bases, discarding of machinery and materials, the cutting off of all surface casings not less than thirty-six (36) inches under the surface level and the restoration of the surface as nearly as possible to its former condition prior to the drilling of each well covered by the Bond.
- 3. The Bond is effective from filing with the Department of Natural Resources until the Natural Resources Commission determines each such well has been:
 - a. Plugged and abandoned in accordance with IC 14-37, 312 IAC 29 et. Seq., the terms of the permit and orders of the Natural Resources Commission; or
 - b. Converted under 312 IAC 29 et. seq., to a fresh water well; or
 - c. Until a substitute bond is filed by the Principal and accepted by the Natural Resources Commission.
- 4. The Bond binds the Principal and Surety and their heirs, executors, administrators, successors, and assigns jointly and severally, to the State of Indiana. No portion of the value of the Bond constitutes an asset of the Principal.
- 5. Notwithstanding paragraph 3, the Surety may in writing notify the Natural Resources Commission and Principal of the intention to terminate liability under the Bond. Service of the notification shall be as specified in 312 IAC 29-12-6. If, following notification, the Principal fails to obtain a substitute bond or to plug and abandon the well in a timely manner, the Surety shall either cause each well to be properly plugged and abandoned or shall forfeit to the State of Indiana the principal sum of the Bond.
- 6. If a permit is revoked for any well under the Bond, the Principal shall cause each well under the Bond to be properly plugged and abandoned in a timely manner or shall forfeit to the State of Indiana the principal sum of the Bond.
- 7. Any action instituted with respect to the Bond shall be governed by the provisions of IC 14-37 and 312 IAC 29 et. seq., or their successor chapter or rule, in effect when the action is instituted.

Signature of Principal	Title	Date signed (month, day, year)
Signature of Surety		Date signed (month, day, year)

Attach Bond Acknowledgement form, Form No. B1.

BOND ACKNOWLEDGEMENT

Part of State Form 12494 (R3 / 12-17) / Form No. B1

	INDIVIDUAL ACKNOWLEDGE	EMENT				
Before me, the undersigned authority, this day personally appeared						
and, Principal who acknowledged executing the foregoing Bond for the uses and purposes therein set forth.						
STATE OF						
COUNTY OF						
Subscribed and sworn to before me this day of, 20						
		Signature of Notary				
County of residence	Date commission expires (month, day, year)	Name of Notary (typed or printed)				
CORPORATE ACKNOWLEDGEMENT						
Before me, the undersigned autho	rity, this day personally appeared					
Bv	. President and	Name of Company . Secretary of				
Name of presi		Name of secretary , Secretary of				
a Corporation, Principal each of whom acknowledge the execution of the foregoing Bond for such Corporation, for the uses and purposes therein set forth.						
STATE OF	SS:					
COUNTY OF						
Subscribed and sworn to before m	e this day of	, 20				
		Signature of Notary				
County of residence	Date commission expires (month, day, year)	Name of Notary (typed or printed)				
	ACKNOWLEDGEMENT BY ATTORN	NEY IN FACT				
Before me, the undersigned authority, this day personally appearedby						
	who executed the	Issuer of bonds ne forgoing instrument on behalf of				
Attorney in fact						
and acknowledged that he/ she executed the same as the act						
and deed of for the uses and purposes therein set forth.						
insurance company						
STATE OF	SS:					
COUNTY OF						
Subscribed and sworn to before me this day of, 20						
		Signature of Notary				
County of residence	Date commission expires (month, day, year)	Name of Notary (typed or printed)				