STATE OF LOUSIANA
OFFICE OF CONSERVATION
FORM APCCO - TRANSFER OF PLUGGING CREDIT

I, _____, owner of the plugging credits listed below, and in that capacity am requesting the Commissioner of Conservation of the State of Louisiana to transfer said plugging credit to:

OPERATOR CODE _____ OPERATOR NAME _____

_____ _____ _____
New Operator Representative Signature New Operator Representative Printed Name Date

PRIOR OPERATOR NAME _____

_____ _____ _____
Prior Operator Representative Signature Prior Operator Representative Printed Name Date

Well Credit SN	**Value** (1/2 or 1)	**Location Type** (Land, Inland Water, Offshore)	**Field Name**	**Max TD (TVD)**	**Expiration Date**	**SN of Well Credit Applied to**

OFFICE OF CONSERVATION USE ONLY

☐ Approved Signed _____

☐ Denied Date _____

APCCO
5/19