

BOARD OF OIL AND GAS CONSERVATION OF THE
STATE OF MONTANA
2535 ST. JOHNS AVENUE
BILLINGS, MONTANA 59102



Surety Company _____
Bond Number _____

KNOW ALL PEOPLE BY THESE PRESENTS, That we, _____

THIS FILE IS FOR USE BY BONDING

Name and Mailing Address

_____ as Principal, and

SOLUTIONS & ALLSURETYBONDS.COM,

Name and mailing address

_____ as Surety,

authorized to do business in the State of Montana, are held and firmly bound unto the State of Montana, in the sum of _____ (\$ _____).

IT'S CLIENTS AND AFFILIATES. PLEASE

The condition of this obligation is that the above Principal(s) proposer(s) to drill or acquire a well or wells for oil, gas, or stratigraphic purposes in and upon land situated within the State of Montana.

CALL (877) 841-6745 TO REMOVE THIS

WATERMARK.

Blanket Bond	To cover all wells drilled or acquired in the State of Montana
Limited Bond	To cover all wells drilled or acquired subject to the following limitations
Individual Well Bond	To cover one well as described below
UIC Bond	To cover salt water disposal wells or underground injection wells
Replacement Bond	To supersede and assume all wells covered by the following described bond

NOW THEREFORE, the principal shall comply with all of the provisions of the laws of the State of Montana and the rules regulations and orders of the Board of Oil and Gas Conservation of the State of Montana especially with reference to the proper plugging of said well or wells and restoration of the surface of the location of said well or wells, and filing with the Board of Oil and Gas Conservation of the State of Montana all notices and records required by the Board. This bond will be released, upon request, after all liabilities are properly removed from the bond.

Date _____ Date _____

Surety _____ Principal _____

Signed

Singed

Print name and title

Print name and title

If the principal is a corporation, the bond should be executed by its duly authorized officers, with the seal of the corporation affixed. When principal or surety executes this bond by agent, power of attorney or other evidence of authority must accompany the bond.

Countersigned: Date _____ Approved Date _____

By _____ By _____

Board of Oil and Gas

Mailing Address: _____

License No. _____ State Code _____

Montana Resident Agent of Licensed Non Resident Agent Resident Agent