Oil and Gas Questionnaire

Broker: _________________________
Insured: _________________________
Address: _________________________
Effective: _________________________

I. APPLICANT INFORMATION
1. Insured is: (Check all that apply)
   __ An investor owning a non-operating working interest in oil & gas wells
   __ An operator owning working interest in wells and manages owned or co-owned lease operations.
   __ A lease operator by contract who does have a working interest in the wells
   __ A developer who as an operator, contracts to have wells drilled and, when completed, title is turned over to others for operation.
   __ A promoter selling drilling prospects to operators for a carried interest in wells
   __ Other ____________________________

2. Years experience in the oil and gas business ______________

II. NON-OPERATING WORKING INTEREST OWNER INFORMATION
1. Do you maintain certificates of insurance from well operators? __Yes __No
2. Are you named as an additional insured on the operator’s policy? __Yes __No
3. Indicate the number of wells with working interests of:
   a. 0-15% _______
   b. 16-25% _______
   c. 26-50% _______
   d. over 50% _______

4. For each state, indicate the number of non-operated oil & gas wells:

<table>
<thead>
<tr>
<th>State</th>
<th>Oil</th>
<th>Gas</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
5. Are there any wells within 1,000 feet of an occupied residence? __Yes __No
   If yes, how many wells? __________________________________________

   Are there any wells located within the corporate limits of any city or town?
   ____ Yes ____ No

   Are there any wells located in an ocean, gulf, bay, marsh or any other body of
   water? ____ Yes ____ No

6. What are the annual costs billed to you for your non-operating interest?
   In oil and gas wells? $__________________________________________

III. OPERATOR INFORMATION

a. Well Information

1. For each state, indicate the number of operated producing and shut in oil & gas
   wells?

<table>
<thead>
<tr>
<th>State</th>
<th>Oil</th>
<th>Gas</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Are there any wells within 1,000 feet of an occupied structure? __Yes __No
   If yes, how many?(Submit a list indicating the specific location of well(s),
   distance
   To the structure, and structure occupancy)

   Are there wells located within the corporate limits of any city or town? __Yes
   __No

   Do you supply domestic house gas? __Yes __No
   If yes, how many houses? ________________________________
   Is there a pressure regulator for each hookup? __Yes __No
   Is there an odorization wick for each hookup? __Yes __No

   Are any wells located in an ocean, gulf, bay, marsh, or other body of water?
   ___Yes ___No

   Are there any wells in a railroad right-of-way? __Yes __No  If yes, how many?
   __

3. How many wells have you had drilled by sub-contractors within the last 12
   months?
   ____________________________________________________________________

   __

4. Are you planning any horizontal wells during the policy period? __Yes __No
5. How many wells do you plan to drill at the following depths during the policy period?

   Less than 2,500 feet?
   Less than 5,000 feet?
   Less than 7,500 feet?
   More than 7,600 feet?

6. Do you operate any recovery operations? __Yes __No

7. Do you operate or have an ownership interest in any gas processing or gasoline recovery (distillate) plants (Fmil?)
   __Yes __No
   If yes, give details:

8. Do you operate any gas sweetening plants? __Yes __No
   If yes, how many?

   a. Indicate safety controls and ppm of H26 being scrubbed at each plants.

   b. What are adjacent exposures with ¼ mile of each plant?

9. How many salt water disposal wells will you operate during the policy period?

   a. How many penetrate known producing zones?

   b. How many abandoned disposal wells are on leases you operate?

10. Have there been any spills or releases of crude, sludge, saltwater or other waste that has resulted in a pollution incident during the last five years?
    __Yes __No
    If yes, how many? Explain.

11. List prior or current events, situations or conditions which in your view can or may lead to future pollution or environmental impairment claims against your company.

   b. PIPELINE INFORMATION

      If you operate pipelines or gathering systems other than those for house gas, Please complete this section.
1. Does the pipeline supply any end users? __Yes  __No
2. Does the pipeline transport only your product? __Yes  __No
3. Does the pipeline run through any towns, cities or populated areas?  
   __Yes  __No
4. Indicate the length of pipeline with outside diameter greater than 4”.
   ______
5. What is the diameter of the largest pipeline? _____________
6. What is the maximum operating pressure of the pipeline system?  
   ______
7. What is the maximum design pressure of the pipeline?  
   ______
8. Are any pipelines above 2” of design pressure?  
9. Are all underground pipelines going through farmland buries at least 36?  
   __Yes  __No
10. Do any pipelines cross railways or roadways, rivers or streams?  
    __Yes  __No  If yes, how are they protected and marked?

IV. EMPLOYEE INFORMATION

1. Are wells operated by your employees? __Yes __No  If yes, list payroll 
   by state 
   And class:
   
<table>
<thead>
<tr>
<th>State</th>
<th>Class</th>
<th>Payroll</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Which operations are performed by your employees on your wells or on 
   Other operator’s wells?  
   For Yourself  For Others
   
   Addizing  ___________________________
   Casing Installation and Pulling  ___________________________
   Cementing  ___________________________
   Drilling and Redrilling  ___________________________
   Equipment Inspection and Repair  ___________________________
   Fracturing  ___________________________
   Land Clearing and Grading  ___________________________
V. CONTRACTOR INFORMATION

1. Do you require independent contractors to sign Master Service Agreements before you grant permission to begin work? __Yes __No
   If yes, which Master Service Contractual Indemnity Agreements are used?
   __ IADC __ AOSC __ API __ Other
   (Submit copies of contractual indemnity agreements other than the standard IADC, API, AOSC, and insurance requirements)

2. How are drilling jobs contracted? __ No contract used applicable
   If contracted, which agreement is used?
   __ Turnkey __ Day Work __ IADC __ API __ Footage __ Other

3. What amount do you expect to spend annually for contractors listed below?
   Lease Operations $_______________
   Workover $_______________
Drilling $________________

4. Do you require minimum limits of liability coverage equal to your own? __Yes  __No
   If no, what minimum limits are required? _________________

5. Do you maintain certificates of insurance for your contractors? __Yes   __No

6. Is a Waiver of Subrogation required of drillers and service contractors? __Yes   __No

7. Are you named an additional insured on contractors policies? __Yes   __No

DECLARATION AND SIGNATURE

The undersigned declares that to the best of his or her knowledge and belief the statements and information in this survey are true. The company is hereby authorized to make any investigation and inquiry in connection with the survey that it deems necessary.

Date: _________________________________

Title: _________________________________

Signed: _______________________________

Submitted By: _________________________