

January 15, 2020

Dear Industry Colleague:

In response to your recent request, enclosed you will find an OERB Assessment Refund Packet. With this packet, we have included a brief fact sheet outlining the programs and successes that the OERB has accomplished over the past year.

The OERB Board and staff have been working diligently to promote our mission to restore orphaned and abandoned well sites and to educate Oklahomans about the vitality, contributions and environmental responsibility of the Oklahoma petroleum industry. Through our clean-up and education efforts, we have made great strides in improving the public perceptions of the oil and natural gas industry.

I believe we can and will continue to do more to promote our industry. However, we cannot do it without your support. I urge you to review the enclosed information and consider the benefits that come from your contribution to the OERB.

I would be happy to meet with you at your convenience to discuss the OERB programs further. Please do not hesitate to contact me at mstitt@oerb.com or 405-601-2277 with any questions.

Sincerely,



Mindy Stitt
OERB Executive Director

Instructions:

1. A person or entity may request a refund only for **net** production owned by that person or entity. A person or entity that redistributes revenues to a third party (or parties) may **NOT** claim a refund for or on behalf of any third party(s). **Any third party(s) must apply for their own refund.**
2. NAME OF APPLICANT must be the name of the person or entity requesting a refund. In the event you are applying for an interest owned by a wholly owned subsidiary, you must provide proof of ownership and the date of purchase of the subsidiary.
3. Complete the information requested on the reverse side of this form. In lieu of completing this form, you may attach a computer printout of all leases for which the application is being made provided that each printout gives the same data and information as is requested by this form (form 101-19-GAS).
4. Please attach copies of check stubs for runs received by applicant for each month of the calendar year where production is indicated. If no runs were received for a given month, please leave the month blank. Complete form(s) for month production was sold, **NOT** month of payment.
5. Each lease must have a completed form 101-19-GAS (duplication of this form is permitted) and supporting documentation. Only one signed affidavit form is required per applicant.
6. Each application must be postmarked by March 31, 2020, and all supporting documentation must be included. **Any application received with a postmark later than March 31 CANNOT BY LAW be honored.**
7. In the event the OERB elects to conduct an audit of the information submitted, you will be informed no later than June 30, 2020. Thereafter you must contact the OERB to schedule a mutually acceptable time period during which the audit may be conducted.
8. Compile the information requested on reverse side (form 101-19-GAS). Mail form(s), completed affidavit (**properly executed before a Notary Public**) and copies of applicable check stubs for the refund period to the Oklahoma Energy Resources Board, 500 N. E. 4th St., Suite #100, Oklahoma City, OK 73104. Include a self-addressed, stamped envelope for the refund check. **If multiple forms are being submitted, please include a summary of each purchaser indicating the total amount due including interest from each.**

NOTE: Interest is calculated by using the average U.S. Treasury Bill rate for 2019 and prorated on a monthly basis (i.e., January is 12/12ths, February is 11/12ths, etc.).

OKLAHOMA ENERGY RESOURCES BOARD

500 N. E. 4th St., Suite 100
Oklahoma City, OK 73104

1-800-664-1301

REFUND OF OKLAHOMA ENERGY RESOURCES BOARD FEE AFFIDAVIT

Senate Bill 370, codified as section 288.1 through 288.12, title 52, Oklahoma Statutes, codifies the Oklahoma Energy Education and Marketing Act (the "Act") and creates the Oklahoma Energy Resources Board (the "Board") and levies an assessment on oil produced in Oklahoma. House Bill 2874 amends section 288.1 through 288.12 to include an assessment on natural gas produced in Oklahoma beginning in September 1996. The Act provides that an owner who desires a refund of the fee paid by him during any calendar year may apply for such during the first three months of the following year. Any person or entity subject to the assessment levied pursuant to Section 288.8A of the Act may request a refund of said assessment. A person or entity may request a refund only for net production actually owned by that person or entity. A person or entity that redistributes net production to a third party (or third parties) may not claim a refund for or on behalf of those third parties. **The third parties must apply for their own refund.**

If you desire a refund, please complete, and properly execute before a Notary Public, this affidavit and send it along with the attached completed forms and documentation of deduction of the assessment, such as check stubs or run statements, to the above address. Only one affidavit per entity is required. For complete instructions see the reverse side of the attached form.

Application for Refund

I swear, affirm and certify under penalty of perjury and law, that during the period of (calendar year) _____, the assessment paid for the Board was paid by or on behalf of _____ (person or entity owning production) in the amount of \$ _____, including interest, and none of these funds are based on redistribution to other owners. I further certify to the Board, under penalty of perjury and law, that the information supplied to the Board on this form or otherwise, including any attachments, is true and correct and accurately represents my ownership and the refund to which I am entitled. I understand that any attachments or additional information supplied to the Board shall be deemed to be subject to and a part of this Affidavit.

(Signature of Affiant)

(Title of Affiant)

(Print or type name)

(Street Address or P.O. Box)

Company if Applicable)

(City)

(State) (Zip)

STATE OF _____)
) SS:
COUNTY OF _____)

Subscribed and sworn to before me this _____ day of _____, 20_____.

My commission expires: _____

Notary Public

Oklahoma Energy Resources Board
500 N. E. 4th St., Suite 100
Oklahoma City, OK 73104

**“PARENT COMPANY” REFUND DISTRIBUTION AFFIDAVIT
AND
HOLD HARMLESS AGREEMENT**

A person or entity may request a Refund of the assessment (the “Refund”), as provided under the Oklahoma Energy Education and Marketing Act, codified as section 288.1 through 288.12, Title 52, Oklahoma Statutes only for net production actually owned by that person or entity. A person or entity that redistributes net production to a third party (or third parties) may not claim a Refund for or on behalf of those third parties.

However, a “parent company” may collect and redistribute a Refund on behalf of its subsidiaries/affiliated entities. If you desire to make claim for and collect a Refund on behalf of a subsidiary/affiliated entity, please complete, and properly execute before a Notary Public, this affidavit, and attach a list (Exhibit “A”) of subsidiaries/affiliated entities for which you are requesting Refunds, and send it to the above address.

The affiant being first duly sworn, deposes and says that: Affiant is the _____ of _____ the parent company (the “Parent Company”) to subsidiaries/affiliated entities listed on Exhibit “A” (the “Affiliated Entities”) and has full power and authority to execute this Affidavit and Hold Harmless Agreement on behalf of the Parent Company; and

Parent Company has fully informed all Affiliated Entities respecting any and all requests for Refunds made by the Parent Company on the behalf of the Affiliated Entities; and

Parent Company agrees to fully indemnify and hold harmless the Oklahoma Energy Resources Board and its officers, agents, representatives, employees and administrative contractor from any and all claims relating to any Refund due the Affiliated Entities and Parent Company’s distribution of said Refunds any of the Affiliated Entities.

(Signature of Affiant)

(Title of Affiant)

(Print or type name)

(Street Address or P.O. Box)

(Company if Applicable)

(City)

(State) (Zip)

STATE OF _____)

) SS:

COUNTY OF _____)

Subscribed and sworn to before me this _____ day of _____, 20 _____.

My commission expires: _____

Notary Public

OKLAHOMA ENERGY RESOURCES BOARD

APPLICATION FOR REFUND OF ASSESSMENT
CALENDAR YEAR 2019

NAME OF APPLICANT: _____
Company Name or Individual (Last Name, First Name, Middle Initial)
 S. S. NUMBER (OR TAX ID. NUMBER): _____
 LEASE NAME &/OR NUMBER: _____

ADDRESS OF APPLICANT: _____
Street Address or P.O. Box (Where Revenue Checks Are Received)

City, State, Zip Code (Where Revenue Checks Are Received)

Instructions:

- Under column (a), indicate the gross value of production from the lease by month from check stub.
- Under column (b), enter the decimal interest you received for each month.
- Under column (c), enter the results of multiplying column (a) times column (b) for each month.
- Under column (e), enter the results of multiplying column (c) times column (d) for each month.
- Under column (g), enter the results of multiplying column (e) times column (f) for each month.

OIL PURCHASER WITHHOLDING ASSESSMENT: _____ OWNER # ASSIGNED TO APPLICANT: _____
 PARTY DISTRIBUTING REVENUE: _____

OIL ASSESSMENT WORKSHEET

Month of Prod.	Column (a) Gross Value (from chk stub)	Column (b) (x) Applicant's Decimal Interest (to 8 places)	Column (c) (=) Net Value (a) x (b)	Column (d) (x) .001	Column (e) (=) Assessment Paid (c) x (d)	Column (f) (x) Interest Factor	Column (g) (=) Refund Due (e) x (f)
JAN				0.001		1.020800	
FEB				0.001		1.019067	
MAR				0.001		1.017333	
APR				0.001		1.015600	
MAY				0.001		1.013867	
JUN				0.001		1.012133	
JUL				0.001		1.010400	
AUG				0.001		1.008667	
SEP				0.001		1.006933	
OCT				0.001		1.005200	
NOV				0.001		1.003467	
DEC				0.001		1.001733	
TOTALS				0.001			

* Annual Average T-Bill Rate (ATBR) = 2.08%
 January interest factor = 1 + (12/12 x ATBR)
 February interest factor = 1 + (11/12 x ATBR)
 etc.

NOTE: If you are a subsequent distributor of revenue, you may NOT apply for a refund on behalf of third party owners.

(SEE THE REVERSE SIDE OF THIS FORM FOR ADDITIONAL INSTRUCTIONS)

OKLAHOMA ENERGY RESOURCES BOARD

APPLICATION FOR REFUND OF ASSESSMENT
CALENDAR YEAR 2019

NAME OF APPLICANT: _____
Company Name or Individual (Last Name, First Name, Middle Initial)
 S. S. NUMBER (OR TAX ID. NUMBER): _____
 LEASE NAME &/OR NUMBER: _____

ADDRESS OF APPLICANT: _____
Street Address or P.O. Box (Where Revenue Checks Are Received)

City, State, Zip Code (Where Revenue Checks Are Received)

Instructions:

- Under column (a), indicate the gross value of production from the lease by month from check stub.
- Under column (b), enter the decimal interest you received for each month.
- Under column (c), enter the results of multiplying column (a) times column (b) for each month.
- Under column (e), enter the results of multiplying column (c) times column (d) for each month.
- Under column (g), enter the results of multiplying column (e) times column (f) for each month.

GAS PURCHASER WITHHOLDING ASSESSMENT: _____ OWNER # ASSIGNED TO APPLICANT: _____
 PARTY DISTRIBUTING REVENUE: _____

GAS ASSESSMENT WORKSHEET

Month of Prod.	Column (a) Gross Value (from chk stub)	Column (b) (x) Applicant's Decimal Interest (to 8 places)	Column (c) (=) Net Value (a) x (b)	Column (d) (x) .001	Column (e) (=) Assessment Paid (c) x (d)	Column (f) (x) Interest Factor	Column (g) (=) Refund Due (e) x (f)
JAN				0.001		1.020800	
FEB				0.001		1.019067	
MAR				0.001		1.017333	
APR				0.001		1.015600	
MAY				0.001		1.013867	
JUN				0.001		1.012133	
JUL				0.001		1.010400	
AUG				0.001		1.008667	
SEP				0.001		1.006933	
OCT				0.001		1.005200	
NOV				0.001		1.003467	
DEC				0.001		1.001733	
TOTALS				0.001			

* Annual Average T-Bill Rate (ATBR) = 2.08%
 January interest factor = 1 + (12/12 x ATBR)
 February interest factor = 1 + (11/12 x ATBR)

etc.

NOTE: If you are a subsequent distributor of revenue, you may NOT apply for a refund on behalf of third party owners.

(SEE THE REVERSE SIDE OF THIS FORM FOR ADDITIONAL INSTRUCTIONS)