

Oil & Gas Service Contractors Supplemental Application

General Information

Named Insured: _____

Mailing Address: _____

Location Address: _____

States in which you work: _____

Years of experience as a Service Contractor: _____

If new in business, years of prior experience and type of work performed: _____

Number of field employees: _____

Projected gross sales: _____ Projected gross payroll: _____

Have gross sales changed from last year? *Yes No

*If so, how much? _____

Complete description of operations: _____

Does the applicant have Workers' Compensation Insurance for all employees? Yes No

Does the applicant perform any operations offshore or over the water (including marshes, swamps, bogs, etc.)? *Yes No

*If yes, please provide details: _____

Does the applicant perform any operations in refineries and/or petrochemical plants? *Yes No

*If yes, please provide details: _____

Does the applicant have a formal safety program in place? Yes No

How often are safety meetings conducted? _____

Subcontractors Information

Subcontracted Operations:

Subcontractors Cost:

Do all subcontractors sign a Master Service Agreement? Yes No

What type of agreement is used? IADC API Other: _____

Do you obtain Certificates of Insurance from all subcontractors? Yes No

What limits of liability are required of your subcontractors? _____

Are you named as an Additional Insured on all subcontractors' policies? Yes No

Class of Operations

Type of Operation	Payroll	Gross Sales
Acidizing/Fracturing	_____	_____
Backhoe/backfilling	_____	_____
Blowout Preventor Installation	_____	_____
Casing Packing	_____	_____
Cementing	_____	_____
Cleaning/Swabbing	_____	_____
Dealers of Equipment or Supplies (see below also)	_____	_____
Dismantling or Erection of Rigs	_____	_____
Dredging	_____	_____
Electrical	_____	_____
Equipment or Supplies Rental (see below also)	_____	_____
Flowline/Waterline	_____	_____
Gas Processing	_____	_____
Gas Squeezing	_____	_____
Gas Sweetening	_____	_____
Gauging	_____	_____
Heat Treating	_____	_____
Geophysical Exploration	_____	_____
Hot Oil	_____	_____
Hydrostatic Testing	_____	_____
Installing Casing	_____	_____
Instrument Logging or Survey Work	_____	_____
Land Clearing/Road Building (see below also)	_____	_____
Lease Beautification	_____	_____
Mechanical	_____	_____
Mud Logging	_____	_____
Painting/Sand Blasting	_____	_____
Paraffin Treatment	_____	_____
Perforating	_____	_____

	Payroll	Gross Sales
Pipe Fitting	_____	_____
Pipe Straightening	_____	_____
Pipeline Construction (see below also)	_____	_____
Plumbing	_____	_____
Pump Installation/Service	_____	_____
Removal of Casing	_____	_____

Type of Operation	Payroll	Gross Sales
Rig Moving	_____	_____
Running Casing	_____	_____
Site Preparation	_____	_____
Slush Pit Construction	_____	_____
Snubbing	_____	_____
Salt Water Disposal	_____	_____
Steam Treating	_____	_____
Surveying	_____	_____
Tool Dressing	_____	_____
Tank Cleaning	_____	_____
Vacuum Truck	_____	_____
Welding (see separate supplemental)	_____	_____
Wireline	_____	_____
Well Completion	_____	_____
Well Plugging	_____	_____
Workover	_____	_____

If none of the above, please complete:

Type of Operation	Payroll	Gross Sales
_____	_____	_____
_____	_____	_____
_____	_____	_____

Equipment or Supply Dealers:

Gross sales of new equipment: \$ _____
 Gross sales of used equipment: \$ _____
 Please attach a complete list of equipment/supplies.

Gross sales of Mud: \$ _____
 Gross sales of Chemicals: \$ _____
 Please attach MSDS on all chemicals sold.

Do you modify (including threading or rethreading) or repackage the products or equipment?
*Yes No

*If yes, please describe: _____

Equipment or Supply Rentals:

Gross sales with operator: \$ _____

Gross sales without operator: \$ _____

Please attach a complete list of equipment or supplies. Please attach the rental agreement in use.

Land Clearing/Road Building:

Are you involved in any land clearing/road work for other than oil and gas leases?
*Yes No

*If yes, please give details: _____

Pipeline Construction:

Annual amount of pipeline constructed that is less than 4 inches in diameter: _____ miles

Annual amount of pipeline constructed that is 4-10 inches in diameter: _____ miles

Annual amount of pipeline constructed that is more than 10 inches in diameter: _____ miles

Percentage of pipeline that is above ground: _____%

Average depth of below ground pipeline: _____

Any pipeline construction within the city limits? *Yes No

*If yes, please detail: _____

I hereby certify that all information is accurate to the best of my knowledge.

Applicant's signature: _____ Date: _____

Producer's signature: _____ Date: _____