



**Oil and Gas  
Exchange First Worksheet  
(Warehouse of Old Property)**

**Exchangor Information**

Name: \_\_\_\_\_

Vesting, if different: \_\_\_\_\_

Street Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

eMail: \_\_\_\_\_ Taxpayer ID or SSN: \_\_\_\_\_

Exchangor is: \_\_\_\_\_ (an individual, a Corporation or a Partnership)

Contact Person, if a Corporation or Partnership: \_\_\_\_\_

State of Formation: \_\_\_\_\_ (If different from State in Address)

**Old Property Information\*:**

Lessor: \_\_\_\_\_

Lease # and Field: \_\_\_\_\_

County(ies): \_\_\_\_\_ State(s): \_\_\_\_\_

OCS # \_\_\_\_\_

Estimated Sale Price: \_\_\_\_\_

Amount of debt, if any: \_\_\_\_\_

Buyer's Name \_\_\_\_\_

Buyer's Address: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

eMail: \_\_\_\_\_

\* Attach a schedule if there are multiple leaseholds.

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**Old Property Closer Information:**

Law Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

Attorney's Name: \_\_\_\_\_ eMail: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

**New Property Information\*:**

Lessor: \_\_\_\_\_

Lease # and Field: \_\_\_\_\_

County(ies): \_\_\_\_\_ State(s): \_\_\_\_\_

OCS # \_\_\_\_\_

Purchase price: \_\_\_\_\_ Expected Close Date: \_\_\_\_\_

Seller's Name \_\_\_\_\_

Seller's Address: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

eMail: \_\_\_\_\_

**New Property Closer Information:**

Law Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

Attorney's Name: \_\_\_\_\_ eMail: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

\* Attach a schedule if there are multiple leaseholds.