



MEMBERSHIP APPLICATION

I hereby make application for membership in the Virginia Oil and Gas Association at the annual dues rate of _____ per year. Enclosed is payment in the amount of _____ covering dues for the period ending **December 31, 2012**. I want to support the Association in its purposes as stated below.

This Association is organized to obtain and disseminate to its members reliable information concerning oil and gas operations, production and activities in the Commonwealth of Virginia and in other localities affecting such operations; to promote and advance the interests of the members of the Association in an impartial manner; to harmonize diverse interests among the members; to propose such legislation, to recommend such governmental action, and to take such action in regard to legislation or other governmental action as may be appropriate for the protection and advancement of the interests of the members of the Association; and to disseminate reliable and trustworthy publicity concerning conditions or development and operation in oil and gas fields, particularly those in the Commonwealth of Virginia; and in general to take such actions as are deemed appropriate to promote the interest of the oil and gas industry.

All persons, including partnerships, corporations or other entities having an interest in the oil and gas industry and who are primarily engaged in: (1) exploration, production and development; (2) contracting; (3) service, supply, sales or similar activities; (4) transmission and distribution by pipeline; and (5) providing professional or educational services, or aiding or promoting in any way whatsoever the welfare and interest of the industry, shall be eligible for membership in the Association.

PRINCIPAL ACTIVITY (please check one)

Exploration, Production, Development _____ Pipeline, Storage, Transmission, Distribution _____
 Contracting _____ Professional, Educational _____
 Service, Supply, Sales _____ Other _____

Name(s) _____
Company _____
Address _____
City _____ **State** _____ **Zip** _____
Telephone _____ **Fax** _____
E-Mail Address _____

MEMBERSHIP TYPE* (please check one)

<u>Operator,</u> Exploration, Production, Development	<u>Type</u>	<u>*Number of Memberships Per Company</u>	<u>Number of Wells Operated in VA</u>	<u>Annual Fee</u>	<u>Portion of Annual Fee Applied to ** VOGA PAC</u>
Small Operator	_____	2	0-25 wells	\$400	\$125
Medium Operator	_____	4	26-150 wells	\$750	\$250
Major Operator	_____	6	>150 wells	\$5/well	\$500
	_____	8	After 1,000 wells	cap @ \$5,000	
<u>Gross Annual Sales Or Revenue - VA</u>					
<u>Corporate</u> Contracting; Service, Supply, Sales; Pipeline, Transmission, Distribution, Storage; Working Interest Owner or Royalty Owner; Distribution; Professional, Educational, Etc...					
Small Corporate	_____	2	Up to \$750,000	\$400	\$125
Medium Corporate	_____	4	\$750,000 to \$2,000,000	\$750	\$250
Major Corporate	_____	6	greater than \$2,000,000	\$1,500	\$500
Individual	_____	Individual		\$200	\$80
		(or Additional Corporate Memberships)			

* Payment of the annual dues entitles a corporation or other business entity to the specified number of individual memberships listed above. Such individuals shall be designated by name and shall be entitled to one vote each in person. All additional individuals in such corporation, other business entity or service company who wish to join the Association may become members by paying the \$200.00 individual dues. It is understood that dues of corporations, other business entities and service companies are a major source of financing the operations of the Association rather than a means for designation of individual memberships. Unless notified, no portion of the annual dues will be tax-deductible as a business expense.

** The portion to be contributed to VOGA PAC is voluntary, may be refused without reprisal and is not tax-deductible as a business expense. If you do not wish for a portion of your Annual Fees to be contributed to VOGA PAC, please so indicate below and the total Annual Fee will be applied to the VOGA General Fund.

_____ No Portion of the Annual Fee may be contributed to VOGA PAC.

OFFICE USE ONLY: DATE REC'D _____ **CK #** _____ **AMT** _____
PAC FUND: _____ **YES** _____ **NO** _____