



**ARKANSAS  
OIL AND GAS  
COMMISSION**

Submit Form To:  
El Dorado Regional Office  
P.O. Box 11510  
El Dorado, Arkansas 71730

**FORM 10 - Sheet 2  
REFINER'S MONTHLY REPORT**

Report of \_\_\_\_\_ For the Month of \_\_\_\_\_, 20 \_\_\_\_\_

**Main Office**

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Contact Person \_\_\_\_\_ E-Mail \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Typed or Clearly Printed Name

**Plant**

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Contact Person \_\_\_\_\_ E-Mail \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Typed or Clearly Printed Name

**Detail Statement of All Receipts Into Plant  
(Barrels of 42 U.S. Gallons)**

From Whom	Crude Oil	Casinghead Gasoline	Kerosene	Stock for Cracking	Other	
					Barrels	Kind
<b>TOTAL</b>	-	-	-	-	-	-
<b>GRAND TOTAL ALL RECEIPTS</b>					<b>- BBLs</b>	

**CERTIFICATE**

I declare under the penalties of perjury that this report has been examined by me and to the best of my knowledge is true, correct and complete.

\_\_\_\_\_ Signature

\_\_\_\_\_ Typed or Clearly Printed Name