



Oil and gas downhole/Over-the-hole general information supplemental application

(Please include along with this completed supplemental, Acord 125, complete equipment schedule including year, model, value, and 5 year currently valued loss runs with loss detail on any loss over \$50,000)*

*Note additional information may be requested based on responses provided

List all States In which you work

Do you currently work or intend to work in any of the following States AL, GA, IL, IN, KY, MI, MS, NY, OH, PA, TN, VA, WI, WV; Yes No

Number of years' experience performing your current operations year(s)

What is your web address?

Any work performed offshore or in any bay, marsh, swamp, or lake? Yes No

What is your percentage of staff turnover in last 12 months? %

Safety

Do you have a formal written Safety program that is given to all employees? Yes No

Is safety training given to all employees? Yes No

How often are safety meetings held? Quarterly Monthly Weekly

Do safety meeting and training sessions address use of large equipment at well sites? Yes No

Do you have a full-time safety manager? Yes No If yes, Name Cell number

Do you have a written cell phone policy? Yes No

Do you have and MVR program that includes pre-hire, post-accident, and annual review? Yes No

Do you have a safety incentive program for all field employees? Yes No

Do you have an active Drug and Alcohol testing program including pre-employment, random, and post-accident? Yes No

Do you have formalized post loss incident review process to determine cause? Yes No

Do you conduct frequent field safety inspection of work in progress?	Yes	No
Do you have a formalized written or pad enabled Job Site Safety Assessment that is completed before each shift?	Yes	No

Risk profile

What is your current work compensation mod?		
Are you a member of IADC?	Yes	No
Are you a member in good standing with ISNet World?	Yes	No
Do you operate in areas that expose equipment and personnel to H2S?	Yes	No
Have you experience any equipment fires or well blowout/fire losses in the last 3 years?	Yes	No

Equipment maintenance

Do you have a formalized OEM equipment maintenance program in operation?	Yes	No
Are your hot oiler units equipped with SM 80 Coils?	Yes	No
Do you replace all hot oiler unit hoses annually?	Yes	No
Do you have all heavy equipment repair such as brakes, fuel system, and hydraulic system repairs done by outside repair facility?	Yes	No

Subcontractors

Do you have a monitoring system for all contracts (MSAs) and Certificates of Insurance?	Yes	No
Do subs provide certificates of insurance with equal or greater limits that yours?	Yes	No
Do you maintain an approved list of vendors and subcontractors?	Yes	No

Please provide operations breakdown by type of operations

Check all that Apply	Type of Work Done	Payroll	Gross Annual Receipts
	acidizing		
	casing installation		
	casing recovery		
	cementing		

	cleaning/swabbing		
	equipment rental (down/over hole)		
	fishing work		
	flowback work		
	fracing		
	general site preparation		
	geophysical exploration		
	hot oil service/treatment		
	hot shot services		
	mud Supply		
	perforation services		
	pipeline construction		
	pumper/gauger operations		
	rig erection/ dismantling		
	roustabout services		
	salt water disposal wells		
	tank battery erection		
	production water services		
	welding		
	well logging service		
	wireline services		
	workover/service rigs		

Any other details you wish to share regarding your risk management program:

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

Applicant's signature

Date

Producer's signature

Date
