



MEMBERSHIP APPLICATION

The Voice of the Permian Basin since 1961

PRESIDENT'S CIRCLE (by production)

More than 25 MMBOE/year - \$75,000

Same benefits package as Permian Vanguard

PERMIAN VANGUARD (by production)

More than 10 MMBOE/year - \$50,000

More than 2 MMBOE/year - \$25,000

More than 1 MMBOE/year - \$10,000

Same benefits package as Black Gold, plus:

- Exclusive input into legislative and regulatory policy decisions
- Opportunity to participate in policy making decisions and lobbying efforts
- Minutes from all board meetings and actions

BLACK GOLD - \$5,000

Same benefits package as Wildcat, plus:

- Membership entitlements, including voting rights, for a maximum of 10 company representatives
- Access to policymakers and invitations to private VIP policymaker receptions
- Special recognition at PBPA events and in official PBPA publications
- E-updates on all PBPA committee activities

WILDCAT - \$2,500

Same benefits package as Gusher, plus:

- Membership entitlements, including voting rights, for a maximum of four company representatives
- Board member eligibility
- Eligible to serve on PBPA committees

GUSHER - \$1,000

Same benefits package as Individual, plus:

- Membership entitlements, including voting rights, for a maximum of two company representatives
- Legislative and regulatory updates
- Access to member-only website features, including membership directory

Individual - \$350

- Membership entitlements, including voting rights, for a maximum of one person
- Subscription to Permian Basin Oil & Gas magazine and American Oil & Gas Reporter
- E-updates on association and industry news
- Business networking opportunities with leading industry decision makers



Please Select Membership: President's Circle Permian Vanguard Black Gold Wildcat Gusher Individual
Company _____

Primary Contact Name _____

Primary Contact Email _____

Mailing Address _____

City, State, Zip _____

Telephone/ Fax _____

To add additional company representatives to the membership, please contact our office.

Payment Method:

____ Check enclosed Please bill me Visa MasterCard AMEX Credit Card #: _____

Name of card holder: _____ Exp. date: ____/____ CVC: _____ Zip code: _____

Please return form with dues to:

Permian Basin Petroleum Association · P.O. Box 132 · Midland, Texas 79702

caci@pbpa.info · 432-684-6345



MEMBERSHIP APPLICATION

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Service Company Membership Levels

PRESIDENT'S CIRCLE - \$25,000

Same benefits package as Toolpushers/Roustabouts, plus:

- Exclusive input into legislative and regulatory policy decisions
- Opportunity to participate in policy making decisions and lobbying efforts
- Minutes from all board meetings and actions



TOOLPUSHERS - \$10,000

Same benefits package as Wildcat, plus:

- Membership entitlements, including voting rights, for a maximum of 10 company representatives
- Minutes from all board meetings and actions
- Access to policymakers and invitations to private VIP policymaker receptions
- Special recognition at PBPA events and in official PBPA publications
- E-updates on all PBPA committee activities

Recommended for companies with Mobile Service Rigs, Pressure Pumping Units, Coiled Tubing Units and Rolling Units, Wireline (Perforating/Logging) Units, Manufacturers, as well as DOT Regulated Trucks, including Hot Oilers, Transports, Haul, Kill, Vacuum, Rig Up, Anchor and other similar vehicles.

ROUSTABOUTS - \$5,000

Same benefits package as Wildcat, plus:

- Membership entitlements, including voting rights, for a maximum of 10 company representatives
- Minutes from all board meetings and actions
- Access to policymakers and invitations to private VIP policymaker receptions
- Special recognition at PBPA events and in official PBPA publications
- E-updates on all PBPA committee activities

Recommended for companies with Casing Crews, Roustabouts, Pipe Testers, Location Contractors, Welders and Well Testers, and Fishing and Rental Tool Companies

Please Select Membership: President's Circle Toolpushers Roustabouts Wildcat Gusher Individual Company _____

Primary Contact Name _____

Primary Contact Email _____

Mailing Address _____

City, State, Zip _____

Telephone/ Fax _____

To add additional company representatives to the membership, please contact our office.

Payment Method:

____ Check enclosed ____ Please bill me Visa MasterCard AMEX Credit Card #: _____

Name of card holder: _____ Exp. date: ____/____ CVC: _____ Zip code: _____

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