62A384-O (1-12)
Commonwealth of Kentucky
DEPARTMENT OF REVENUE

OIL PROPERTY TAX RETURN
LEASE REPORT

For Assessment of January 1, _____

File by April 16 with:
Department of Revenue
Station 33
501 High Street
Frankfort, Kentucky 40601-2103
(502) 564-8334

Name				
Number and Street				Social Security Number ___ ___ ___ | ___ ___ | ___ ___ ___ ___
City	State	ZIP Code	Telephone Number ( )	Federal Identification Number ___ ___ | ___ ___ ___ ___ ___ ___ ___

Property located in _____ County, Kentucky.

Under Kentucky law (KRS 132.820) each property owner is required to report all taxable property which he or she owns. This includes sub-surface mineral rights which are taxable as an interest in real property. This return is provided for the purpose of reporting developed oil property. Each year all persons, corporations, businesses and partnerships owning, leasing or having knowledge of developed oil properties in the Commonwealth of Kentucky must complete and file this tax return with the Department of Property Valuation by April 16. **File a separate return for each developed property per county.** If the division of ownership is different for each well on the property, file a separate tax return for each individual well. **Each lease must be listed separately *by the purchaser's lease number and name*. Do not report leases under a grouped unit number.**

As a producer/operator, do you want to receive all the tax bills for your working interest owners? ☐ Yes ☐ No If No, Complete Division of Ownership required (*See Reverse Schedule*).

Purchaser's/Transporter's Name (if different from filer)	Operator's Name (if different from filer)	Number of Producing Wells	
Purchaser's Lease Number	Barrels of Oil Produced (Jan. 1–Dec. 31)	Year of First Production (not reporting year)	Waterflood Allowance Credit(✓)
Purchaser's Lease Name	Total $ Value of Production for Lease (***Less Severance Tax***)		

DECLARATION

I declare, under the penalties of perjury, that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete return; and that my taxable property has been listed at its fair cash value.

Name of Company	Signature of Preparer	Signature of Producer/Operator	Date

Filings received after April 16 will be subject to applicable penalties.

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OIL PROPERTY DIVISION OF INTEREST—OWNERSHIP SCHEDULE

Lease Number _____ Lease Name _____ Page _____

Owner Name	Social Security No. or FEIN	Owner Address	City	State	ZIP Code	Decimal % (0.875) Ownership of Lease	Ownership Type (W, O, R)

INSTRUCTIONS: The producer/operator or agent thereof is **required** to report (1) the names, SSN/FEIN, and addresses of the working, royalty, and overriding interest owners associated with the property as of January 1 of the tax year; (2) the **decimal** percentage of ownership for each owner; (3) the type of ownership designated by the letter "W," "R," or "O"; and, if applicable, (4) the annual net income (including delayed payments) per royalty and fee owner.

NOTE: If the producer/operator owns all interest (working and royalty) in the property, enter "1.00" under the heading Decimal % Ownership and an "A" under Ownership Type. The assessment will be based on the industry standard of .875 working and .125 royalty. *Tax bills will be prepared according to this ownership schedule. Complete the schedule to reflect the desired billing.*