62A384-O (1-17) Commonwealth of Kentucky

OIL PROPERTY TAX RETURN LEASE REPORT

Department of Revenue File by April 17 with:

			()			
		Federal Identification Number	Telephone Number	Zip Code	State	City
		Social Security Number				Number and Street
County, KY	Property located in					
						Name
(502) 564-8334						
Frankfort, Kentucky 40601-2103						
501 High Street	71,	For Assessment of January 1,				
3/4/1011 33						DEPARTMENT OF REVENUE

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 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 Commonwealth of Kentucky must complete and file this tax return with the Office of Property Valuation by April 17. File a separate return for each developed property per county. If the division of ownership is 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

s a producer/operator, do you want to receive all the tax bills for your working interest owners? \square Yes	terest owners? Yes No If No, Complete Division of Ownership required (See Reverse Schedule)	required (See Rever	se Schedule)
burchaser's/Transporter's Name (if different from filer)	Operator's Name(if different from filer)	Number of Producing Wells	ucing Wells
urchaser's Lease Number	Barrels of Oil Produced (Jan. 1 – Dec. 31)	Year of First Production (not reporting year)	Waterflood Allowance Credit ()
urchaser's Lease Name	Total \$ Value of Production for Lease (Less Severance Tax)		

DECLARATION

return; and that my taxable property has been listed at its fair cash value. 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

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Oil Property Division of Interest - Ownership Schedule

DEPARTMENT OF REVENUE

Lease Number: ______ Lease Name: ______

Page: ______

		1				Owner Name
						Social Security No. or FEIN
				Die		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 or 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.