



PROPERTY SCHEDULE FOR GAS AND OIL WELL ASSESSMENT

State Form 9931 (R12 / 1-23)

Prescribed by the Department of Local Government Finance

January 1, _____

FORM G & O-1

PRIVACY NOTICE

The records in this series are confidential; however, an oil or gas interest listed on the delinquent property tax list may be disclosed to the public according to IC 6-1.1-35-9(g).

INSTRUCTIONS:

1. File separate schedule for each gas and oil lease.
2. The form is to be filed with the appropriate township or county assessor not later than May 15.
3. Pursuant to IC 6-1.1-4-12.6, failure to file this form on or before May 15 will result in a \$25 penalty and an additional 10% penalty for failure to file this form within thirty (30) days after the May 15 due date.
4. Gas and oil interests are assessable per IC 6-1.1-4-12.4 and IC 6-1.1-4-12.6.

SECTION 1		TAXPAYER INFORMATION	
Name of Taxpayer		Telephone Number ()	
Address (number and street, city, state, and ZIP code)			
(Check One) <input type="checkbox"/> Owner <input type="checkbox"/> Operator		Contact Person	
Title of Contact Person		Email Address of Contact Person	

SECTION 2		LEASE INFORMATION	
Location	County	Township	DLGF Taxing District Number
Lease	Section	Range	Acres
Legal Description			
<input type="checkbox"/> Check if the well is an oil well using secondary recovery method. Also check if the well stimulates oil production by means of injection of water, steam, hydrocarbons, or chemicals, or by means of in situ combustion. (IC 6-1.1-4-12.6)			

SECTION 3		FACTORS FOR BASIS OF ASSESSMENT	
A.	Price Per Unit of Gas or Oil on Assessment Date (per DLGF)	3A.	Per MCF or barrels
B.	Average Daily Production of Gas or Oil	3B.	
C.	Annual Production Value (multiply Line 3A by Line 3B by 365)	3C.	
D.	Enter 0.5 if Secondary Recovery Method In Use Enter 1.0 if Initial Recovery Method	3D.	
E.	Interest in Gas or Oil Rights (multiply Line 3C by Line 3D)		3E.
F.	Appurtenances – Enter Number of Wells	3F.	
G.	Enter Value of Single Well Appurtenance (per DLGF)	3G.	
H.	Total Value of Appurtenance (multiply Line 3F by Line 3G)		3H.
I.	Total Basis of Working Interest Assessment (Sum Line 3E and Line 3H and enter here and on Line 5A)		3I.

SECTION 4		COMPUTATION OF ROYALTY INTEREST ASSESSMENT	
A.	Interest in Gas or Oil Rights (from Line 3E)	4A.	
B.	Basis for Royalty Assessment (multiply Line 4A by 1.50)	4B.	
C.	Enter Royalty Interest Factor (for example, 0.1250 for 1/8 interest)	4C.	
D.	Total Royalty Interest Assessment Subject to Allocation on Page 2 (multiply Line 4B by Line 4C)		4D.

SECTION 5		COMPUTATION OF WORKING INTEREST ASSESSMENT	
A.	Total Basis of Working Interest Assessment (from Line 3I)	5A.	
B.	Enter Total Royalty Interest Assessment (from Line 4D)	5B.	
C.	Working Interest Factor		Working Interest Assessment (subtract Line 5B from Line 5A) 5C.

1. Enter in Column 1 an R for a royalty interest or a W for a working interest.
2. Enter in Column 2 the decimal equivalent for the interest in the entire property (for example, 0.1250 for a 1/8 royalty interest). The entries in this column should total 1.0000.
3. Enter in Column 3 the decimal equivalent of the partial interest in the particular interest noted in Column 2 (for example, 0.5000 for a 1/2 interest in the 1/8 royalty interest). The entries in this column for a particular interest type (R or W) should total 1.0000.
4. Multiply the interest in Column 3 by the respective assessment subject to allocation and enter the result in Column 4. NOTE: the sum of the entries should equal the sum of Line 4D and Line 5C.

[illegible]

ACKNOWLEDGMENT AND CERTIFICATION		
Under the penalties of perjury, I hereby certify that this schedule to the best of my knowledge and belief is true, correct, complete, and reports the production and well information under this lease.		
Signature	Printed Name <i>(type or print)</i>	Date Signed <i>(month, day, year)</i>
Address <i>(number and street, city, state, and ZIP code)</i>		

NOTARY	
STATE OF:	COUNTY OF:
<p>Before me, a notary public in and for said state and county, personally appeared, this _____ day of _____, 20 _____, the owner/operator or a person duly authorized to sign for and on behalf of said lessee, who acknowledged the execution of this return as the voluntary act and deed of the owner/operator.</p>	
Signature of Notary	County of Residence
Name of Notary <i>(type or print)</i>	Date Commission Expires <i>(month, day, year)</i>