



# Alaska Alternative Tax Credit for Oil and Gas Exploration under AS 43.55.025

## Summary

Federal EIN	Date of Claim	Name of Single Explorer or Designated Joint Applicant		
Mailing Address		City	State	Zip Code
Contact Person for Examination of Records		Title	Phone Number	Fax Number
Email Address of Contact Person		Business Type <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> LLC <input type="checkbox"/> Other _____		

## Exploration Project Description

Name of exploration project	Location of exploration project (select from drop down)
Type of exploration project: exploratory well, seismic project, or other geophysical exploration	
Type of interest in the project held by the applicant: operator, partner, etc	

## Exploration Credit (select from drop down)

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## Supporting Information

<input type="checkbox"/> Check if Schedule D is attached as required by AS 43.55.025(f)(2)
<input type="checkbox"/> Check if Schedule E is attached for a consortium of explorers
<input type="checkbox"/> Check if copy of Well Completion Report or Application for Sundry Approvals is attached (AOGCC form)
<input type="checkbox"/> Check if copy of survey or plat map showing location of well or exploration activities is attached
<input type="checkbox"/> Check if well or project was included in a Plan of Development or exploration as of May 13, 2003

***I declare under penalty of perjury that this application and each attachment has been examined by me and to the best of my knowledge and belief is true, correct and complete.***

Signature		Date
Print Name	Print Title	

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# Alaska

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### Schedule A - Exploration Well

Federal EIN	Date of Claim	Name of Single Explorer or Designated Joint Applicant
Well qualifies under (select from drop down)		Qualifying exploration well name
Date exploration well spudded		Surface location of qualifying well (attach a survey plat)
Date exploration well completed, suspended or abandoned		Bottom hole location of qualifying well (attach a survey plat)
Status of well	Boundary of nearest unit (attach a survey plat)	Unit boundary distance from qualifying well

### Nearest Preexisting Well Information

Bottom hole location of nearest preexisting well (attach a survey plat and map)	Date nearest preexisting well completed, suspended, or abandoned
Horizontal bottom hole distance from nearest preexisting well	

### Qualified Exploration Well Expenditures

1) Drilling rig and drilling contractor cost	
2) Drilling casings, tubings, equipment and supplies	
3) Rig mobilization costs	
4) Rig de-mobilization costs	
5) Labor costs	
6) In-state transportation of personnel	
7) Transportation of equipment	
8) Owned drilling equipment costs	
9) Camp quarters and subsistence	
10) Aviation or marine equipment, rental	
11) Aviation or marine equipment, owned	
12) Mapping and surveying	
13) Fuel	
14) Supplies	
15) Repairs	
16) Off site equipment, rental	
17) Off site equipment, owned	
18) Communications	
19) Construction of roads, docks, heli-pads and landing strips	
20) Abandonment	
21) Well-logging, exploratory only	
22) Other (describe)	
23) Less: Reimbursements or payments received for qualifying expenditures	
<b>24) Total qualifying expenditures for credit</b>	\$
25) Credit percentage allowed (30%, 40%, 80%, 90% or 100%)	
<b>26) Amount of credit claimed (line 24 x line 25)</b>	\$

*Total claimed credit is carried to Exploration Credit Summary line.*

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## Schedule B - Seismic

Federal EIN	Date of Claim	Name of Single Explorer or Designated Joint Applicant
Seismic or geophysical project name or description		
Credit applied for seismic or geophysical (select from drop down)		Nearest unit boundary attach a survey plat of seismic area and the nearest unit
Date seismic exploration started		Date seismic exploration completed
Total area (square miles) under seismic exploration		Area (square miles) under seismic exploration within a production or exploration unit
Proportion of total area qualifying for credit (%)		Proportion of total area excluded from qualifying for credit (%)

## Qualified Seismic or Geophysical Exploration Expenditures

1) Contractors	
2) Labor costs	
3) In-state transportation of personnel	
4) Transportation of equipment	
5) Survey equipment, rental	
6) Survey equipment, owned	
7) Leased or owned transportation equipment	
8) Camp quarters and subsistence	
9) Aviation or marine equipment, rental	
10) Aviation or marine equipment, owned	
11) Mapping	
12) Fuel	
13) Supplies	
14) Repairs	
15) Offsite equipment, rental	
16) Offsite equipment, owned	
17) Communications	
18) Construction of roads, docks, heli-pads and landing strips	
19) Other	
<b>20) Total qualifying expenditures for credit</b>	\$
21) Less: Proportion of expenditures for seismic conducted within an existing unit boundary	\$
22) Less: Reimbursements or payments received for qualifying expenditures	
23) Adjusted qualifying expenditures for seismic exploration credit	\$
24) Credit percentage allowed (5%, 40% or 75%)	
25) Amount of credit claimed (line 23 x line 24)	\$

Total claimed credit is carried to Exploration Credit Summary.

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## Schedule C - Data Release Form

Federal EIN	Date of Claim	Name of Single Explorer or Designated Joint Applicant	
Name and Location of Seismic, Geophysical, or Exploration Well Project			Completion Date of Exploration Activity

## Lessor Information

Federal EIN of Lessor	Name of Lessor		
Mailing Address	City	State	Zip Code
Contact Name	Contact Title		
Contact Phone	Contact Email Address		

***In accordance with the requirements under AS 43.55.025, we, the undersigned, understand that all the required data for the geophysical, seismic, or exploration well project referred to above will be provided to the State of Alaska. We acknowledge, understand, and agree that the data provided may be publicly disclosed as part of the requirements under AS 43.55.025.***

Signature of Single Explorer or Designated Joint Applicant	Date	
Printed Name	Title	Telephone Number

Signature of Lessor	Date	
Printed Name	Title	Telephone Number

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# Alaska Alternative Tax Credit for Oil and Gas Exploration under AS 43.55.025

## Schedule D - Agreement Required by AS 43.55.025(f)(2)

Federal EIN	Date of Claim	Taxpayer Name	
Exploration Data Contact Person		Title	
Mailing Address	City	State	Zip Code
Email Address of Contact Person	Telephone Number	Fax Number	

### Explorer/taxpayer hereby agrees with all requirements under AS 43.55.025(f)(2):

(A) to notify the Department of Natural Resources, within 30 days after completion of seismic or geophysical data processing, completion of well drilling, or filing of a claim for credit, whichever is the latest, for which exploration costs are claimed, of the date of completion and submit a report to that department describing the processing sequence and providing a list of data sets available;

(B) to provide to the Department of Natural Resources, within 30 days after the date of a request, unless a longer period is provided by the Department of Natural Resources, specific data sets, ancillary data, and reports identified in (A) of this paragraph; in this subparagraph,

- (i) a seismic or geophysical data set includes the data for an entire seismic survey, irrespective of whether the survey area covers non-state land in addition to state land or land in a unit in addition to land outside a unit;
- (ii) well data include all analyses conducted on physical material, and well logs collected from the well, results, and copies of data collected and data analyses for the well, including well logs; sample analyses; testing geophysical and velocity data including seismic profiles and check shot surveys; testing data and analyses; age data; geochemical analyses; and tangible material;

(C) that, notwithstanding any provision of AS 38, information provided under this paragraph will be held confidential by the Department of Natural Resources,

- (i) in the case of well data, until the expiration of the 24-month period of confidentiality described in AS 31.05.035(c), at which time the Department of Natural Resources will release the information after 30 days' public notice unless, in the discretion of the commissioner of natural resources, it is necessary to protect information relating

to the valuation of unleased acreage in the same vicinity, or unless the well is on private land and the owner, including the lessor but not the lessee, of the oil and gas resources has not given permission to release the well data;

- (ii) in the case of seismic or other geophysical data, other than seismic data acquired by seismic exploration subject to (k) of this section, for 10 years following the completion date, at which time the Department of Natural Resources will release the information after 30 days' public notice, except as to seismic or other geophysical data acquired from private land, unless the owner, including a lessor but not a lessee, of the oil and gas resources in the private land gives permission to release the seismic or other geophysical data associated with the private land; See current statutes and regulations for complete citation.
- (iii) in the case of seismic data obtained by seismic exploration subject to (k) of this section, only until the expiration of 30 days' public notice issued on or after the date the production tax credit certificate is issued under (5) of this subsection;

See current statutes & regulations for complete citation.

**NOTE: The information required above should be sent to:**

**State of Alaska  
Department of Natural Resources,  
Division of Oil and Gas  
Attn: Resource Evaluation Section  
550 W 7TH AVE STE 1100  
ANCHORAGE AK 99501**

<i>I declare under penalty of perjury that I am authorized to act on behalf of the filer.</i>	
Signature	Date
Printed Name	Printed Title

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## Schedule E - Designated Joint Applicant and Members of a Consortium of Explorers

Federal EIN	Date of this Claim	Name of Designated Joint Applicant Filing Credit Application
Contact Person	Contact Phone Number	Email Address of Contact Person
Proportion of interest (as a %) in exploration costs incurred by designated joint application	Proportion of the cost (in dollars) of the exploration well or project incurred by designated joint applicant	
Relationship of designated joint applicant to the consortium of explorers (partner, joint venture, operator, or other)		
Name and location of exploration well or project		Completion date of exploration activity
Signature	Name and Title	Date

**List below each member of the consortium of explorers participating in this exploration project. Each member must sign under penalty of perjury that this application and each attachment, to the best of his or her knowledge, is true and complete.**

Federal EIN	Name of Joint Applicant	Phone Number	
Mailing Address	City	State	Zip Code
Proportion of interest in exploration credit (%) incurred by this explorer	Proportion of the cost (in dollars) of the exploration well or project incurred by this explorer		
Explorer's relationship to the consortium of explorers (partner, joint venture, operator, or other)			
Signature	Name and Title	Date	

Federal EIN	Name of Joint Applicant	Phone Number	
Mailing Address	City	State	Zip Code
Proportion of interest in exploration credit (%) incurred by this explorer	Proportion of the cost (in dollars) of the exploration well or project incurred by this explorer		
Explorer's relationship to the consortium of explorers (partner, joint venture, operator, or other)			
Signature	Name and Title	Date	

Federal EIN	Name of Joint Applicant	Phone Number	
Mailing Address	City	State	Zip Code
Proportion of interest in exploration credit (%) incurred by this explore	Proportion of the cost (in dollars) of the exploration well or project incurred by this explorer		
Explorer's relationship to the consortium of explorers (partner, joint venture, operator, or other)			
Signature	Name and Title	Date	

(Use additional pages as necessary, the sum of the proportion of interests of all members must total 100%)

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## Schedule F - Individual Tax Credit Information

*THIS FORM SHOULD BE COMPLETED BY EACH PARTNER/JOINT APPLICANT INDIVIDUALLY AND SENT DIRECTLY TO THE TAX DIVISION. THIS INFORMATION WILL NOT BE DISCLOSED TO THE OTHER PARTNERS/JOINT APPLICANTS AND WILL BE HELD CONFIDENTIAL UNDER AS 43.05.230 AND 40.25.100.*

Federal EIN	Date of Claim	Taxpayer Name
Contact Person	Contact Phone Number	Email Address of Contact Person

## Tax Credit Application Information

Project Name	Designated Joint Applicant's Name
Location of Exploration Well, Seismic, or Other Geophysical Project	Completion Date of Exploration Project
Total Qualifying Expenditures Claimed for Project	Total Credit Claimed for Project

## Individual Credit Filing Information

Portion of applicants total expenditures in AS 43.55.025 claim for above project (dollars) \_\_\_\_\_ \*

*\*This amount should tie to Schedule E of Form 310, filed by designated joint applicant*

**Calculate total credit request under AS 43.55.025 based on expenditures not already claimed under AS 43.55.023(a) or (l)**

Amount of same expenditures for above project claimed under AS 43.55.023(a) or (l) \$ \_\_\_\_\_

Total expenditures qualifying for current AS 43.55.025 claim \$ \_\_\_\_\_

Credit % \_\_\_\_\_

**Total credit amount requested \$ \_\_\_\_\_**

**Notes to claim:**

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<i>I declare under penalty of perjury that I am authorized to act on behalf of the filer.</i>			
Signature			Date
Printed Name		Printed Title	

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