

Oil and Gas Production Tax Credits under AS 43.55.023 and 43.55.025

Lessor Data Release

Taxpayer Name	Federal EIN or SSN	Date of this Claim
Taxpayer Contact Name	Title	Telephone Number
Name and Location of Geophysical, Geological, or Exploration Well Project		Completion Date of Exploration Well or Project (expected)

Lessor Information

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

In accordance with the requirements under AS 43.55.023 and 43.55.025, we, the undersigned, understand that all the required data for the seismic, geophysical, geological, or well exploration project referred to above will be provided to the State of Alaska.

We acknowledge, understand, and agree that the data provided may be publically disclosed as part of the requirements under AS 43.55.023 and 43.55.025. Yes No

Signature of Lessor *		Date
Print Name	Title	Telephone Number
Date Signed Form was Submitted *		
Notes *		

* If this form was signed by the lessor and submitted to the Tax Division in connection with a previous claim for the same project, then another signature is not required, but the date that it was previously submitted with must be provided above.

This form is available online at www.tax.alaska.gov

Submit completed applications via Revenue Online at
www.tax.alaska.gov