Tanks

Lines

CONFIDENTIAL: (RS 47:2327) FORMS FILED BY A TAXPAYER SHALL BE USED BY THE ASSESSOR, THE GOVERNING AUTHORITY, AND THE LOUISIANA TAX COMMISSION SOLELY FOR THE PURPOSE OF ADMINISTERING THIS STATUTE.

LEGAL CITATION AND INSTRUCTIONS: THIS REPORT SHALL BE FILED WITH THE ASSESSOR OF THE PARISH INDICATED BY APRIL 1st OR WITHIN 45 DAYS AFTER RECEIPT, WHICHEVER IS LATER, IN ACCORDANCE WITH RS 47:2324.

-USE ATTACHMENTS IF NECESSARY-

LAT 12

PERSONAL PROPERTY REPORT - OIL AND GAS PROPERTY

NAME/ADDRESS (Indic	ate any Cha	anges)				RI	A 5	harles R. Her ssessor For C 01 Texas St. hreveport, La	addo P Rm. 10	arish 2		
						PA	ARISH Cadd	o	WAR	D		
						FI	FIELD NAME AND CODE NUMBER					
					LOCATION SECTION TOWNSHIP RANGE							
WARD ASSESSMENT NO.				01	OWNER/PERSON TO CONTACT PHONE							
	Call	318-226-6	719									
DES	CKIPII	ON OF ALL PRO	OPER	RIY OWNE	DINA	VARD	- SUBMIT S	EPARATE REPO	OKI FOR	EACH WA	RD	
DESCRIPTION OF WELLS AND/OR SURFACE EQUIPMENT BY LEASE SERIAL NUMBER NUMBER				WELL TYPE	ACTIVE LOWER PERF	FAIR MARKET VALUE		ASSESSED VALUE				
SUMMARY OF PROPERTY IN WARD AND FIELD												
PROPERTY CLASS		FAIR MARKE VALUE	ET	ASSES VAL				PROPERTY CLASS		MARKET ALUE	ASSESSED VALUE	
Well	ls						In	Inventories				
Oil and Gas Equip.							Field Imps.					

LAT 12 ATTACHMENT A - COMPLETE A SEPARATE ATTACHMENT FOR EACH WELL SERIAL NUMBER

SIGNATURE AND VERIFICATION

Other Property

Total

I declare that under the penalties for filing false reports that this return has been examined by me to the best of my knowledge and belief is a true, correct and complete return. If the return is prepared by other than the taxpayer, his declaration is based on all the information relating to the matters required to be reported in the return of which he has knowledge.

Signature of Taxpaver	Date

YEAR

DESCRIPTION OF ALL	DDODEDTY OWNE	THE WALADID CHEMIT	CEDADATE DEDODT	EOD EACH MADD
DESCRIPTION OF ALL	PRUPERT UVVIVE	JIN WARD-SUDMII	SCPARATE REPURT	FUR FAUR WARD

CONSIGNED GOODS, LEASE, LOANED, OR RENTED EQUIPMENT, FURNITURE, ETC. NAME AND ADDRESS PROPERTY DESCRIPTION AGE MONTHLY PRESENT DAY SELLING PRICE VALUE **NAME AND ADDRESS** PROPERTY DESCRIPTION AGE MONTHLY SELLING PRICE VALUE **TOTAL FAIR MARKET VALUE** **ASSESSED VALUE** **NOTE: PENALTIES FOR FAILURE TO FILE THIS FORM INCLUDE WADVER OF RIGHTS TO APPEAL YOUR ASSESSENENT AND MAY INCLUDE A MONETARY PENALTY. (RS 47:1992 2330) **NOTE: PENALTY. (RS 47:1992 2330) **NEED ASSISTANCE PLASE THE PROJECTION THE INCLOSED TAX FORM AND YOU FEEL YOU NEED ASSESSED VALUE** **I declare under the penalties for filing false reports (R.S. 14:125: up to 500.00 fine or imprisonment for one year or both, plus additional penalties defined in Act 23306 of the 1999 Regular Session) that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.* This return must be signed by the taxapayer, authorized officer or partner and by the preparer before a flutary Public.** SIGNATURE OF TAXPAYER DATE SIGNATURE OF PREPARER DATE Sworn to and subscribed befor me this day of 20 day of 20	DESCRIPTION OF WELLS AND/OR	WELL	LEASE	WELL	WELL	ACTIVE	FAIR MARKE	T ASSESSED	
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