PRINT

DIVISION OF MINERAL RESOURCES

PURCHASER OR TAKER'S ANNUAL CRUDE OIL REPORT

NEW YORK STATE OF OPPORTUNITY. | Department of Environmental Conservation

PURCHASER OR TAKER (Full name as registered)			PURCHASE YEAR
ADDRESS (P.O. Box or Street Address)			
CITY		STATE	ZIP CODE
WELL LOCATION			
County:	Town:	Field:	

	Owner	Tank Number	Crude Oil (Barrels) Purchase or Transported
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

Remarks:

I affirm under penalty of perjury that I am _____(title)

of _____(organization); that I am authorized by that organization to make this report; that this report was prepared under my supervision and direction; and that the information provided in this report is true to the best of my knowledge and belief. I am aware any false statement made in this report is punishable pursuant to Section 210.45 of the Penal Law.

_____	_____	_____
Signature of Authorized Representative	Print or Type Name of Authorized Representative	Date