

## Oilfield Site Restoration Fee Return - Oil and Condensate Production

Louisiana Revised Statute 30:87

Mail to:

Louisiana Department of Revenue Taxpayer Compliance Division - SES

P.O. Box 201

Baton Rouge, LA 70821-0201

For questions about this form, please contact:

Phone: (855) 307-3893 Email: Severance.Inquiries@la.gov

											.mqum				
LDR Account Number								Taxpayer Name							
Address							City			State	State Zip Code				
Foreign Nation, if not United States (Do not abbreviate.)								Email Address							
FOR OFFICE USE ONLY Field flag Taxable Period (mm/yy)							O If your name has changed, fill in circle.  O If amended return, fill in circle.  O If final return, fill in circle.  O/C								
of Quarter of					B Second Mo of Quarte (Barrels)	onth	C Third Month of Quarter (Barrels)	Total Number of Barrels Reported Fee Rate							
ted 25	1	Full rate (Sev H, IA, OW, T	verance tax rate codes 1, , 1T, 1P, and OR)	D, <b>1a</b>	(2 3 2.2)	(2311013)	.,	(==::::)		х	0.04	1b		00	
somple ly 1, 20	2	Incapable ra	te	2a						х	0.02	2b		00	
For wells completed before July 1, 2025	3	Stripper rate		3a						х	0.01	3b		00	
For	4	Total subject (Add Lines 1	t to fees b, 2b, and 3b.)	·								4		00	
sted 25	5		verance tax rate codes 1N 1TN, 1PN, and OR)	I, D, <b>5a</b>						х	0.04	5b		00	
For wells completed after July 1, 2025	6	Incapable ra	te	6a						х	0.0385	6b		00	
wells o	7	Stripper rate		7a						х	0.019	7b		00	
For	8	Total subject to fee (Add Lines 5b, 6b, and			7b.)							8		00	
	9	Net total subject to fee (Add Lines 4 and 8.)										9		00	
1	0	Interest (See instructions.)										10		00	
1	1	Delinquent p	enalty (5% for each 30 da	ays, or frac	ction thereof, not	to exceed 25	5% of L	_ine 9)				11		00	
f	2	Total fees, interest, and penalty due (Add Lines 9, 10, and 11.) Make payment payable to <b>Louisiana Department of Revenue.</b> DO NOT SEND CASH. Pay this amount.										12		00	
f the	du er p	ue date falls penalties of p	on or before the 25th da s on a weekend or lega perjury, I declare that I h	al holida nave exan	y, the return is	due the ne	ext bu	usiness day ar ing schedules a	nd becomes	delinq s, and	uent the	e firs	t day thereafter my knowledge a	r. Ind	
belief, they are true, correct, and complete. Declaration of preparer (other that Signature								er) is based on	all informatio		ich prep (mm/dd/		nas any knowled	je.	
<u> </u>															
Printed Name Title							Telephone								
PAID			Print Preparer's Name Preparer's Signature				Date (mm/c			mm/dd/j	Check if self-employed			ed.	
PREPARER USE ONLY			Firm's Name >							Firm's FEIN ➤					
			Firm's Address							elepho	ne ➤			_	
Date	bu	siness disco	continued (mm/dd/yyyy)	•	nly if chang business sold (i		ines	S status ha		d.					
				For offic		PTI	IN, FE	EIN, or LDR Acc Paid Prepa		of			5520		