

PRODUCTION DATA

WELL SERIAL NUMBER:

Year/Month	Oil Wells		Gas Wells	
	BBLS. Oil	MCF Gas	MCF Gas	BBLS. Condensate
2014				
2015				
2016 / 1				
/ 2				
/ 3				
/ 4				
/ 5				
/ 6				
/ 7				
/ 8				
/ 9				
/ 10				
/ 11				
/ 12				

THIS LAT 12 - ATTACHMENT A MUST BE COMPLETED TO RECEIVE CREDIT FOR FUNCTIONAL AND/OR ECONOMIC OBSOLESCENCE OR SHUT-IN STATUS.

Note: Test data or other evidence from field operations may be used to allocate total lease production on multiple well leases.

Is Casinghead gas sold? Yes _____ No _____
 Is this well shut-in? Yes _____ No _____

Parish of Lafayette

Assessor's Office

Post Office Box 3225
Lafayette, LA 70502-3225

Phone: 337-291-7080

Fax: 337-291-7085

Website: www.lafayetteassessor.com

E-mail: personalprop@lafayetteassessor.com

LAT 12 OIL & GAS PROPERTY
SELF REPORTING - PERSONAL PROPERTY FORM

2017

IMPORTANT TAX FORMS ARE ENCLOSED



IMPORTANT PROPERTY TAX SELF REPORTING FORMS ENCLOSED

NOTE: PENALTIES FOR FAILURE TO FILE THIS FORM INCLUDE WAIVER OF RIGHTS TO APPEAL
YOUR ASSESSMENT AND MAY INCLUDE A MONETARY PENALTY (RS 47:1992 & 2330)

Need Assistance?

AFTER YOU REVIEW THE ENCLOSED TAX FORMS AND YOU FEEL YOU NEED ASSISTANCE
PLEASE CALL YOUR ASSESSOR LISTED ABOVE. THANK YOU.

LAFAYETTE PARISH ASSESSOR

P.O. BOX 3225
LAFAYETTE, LA 70502-3225
TELEPHONE 337-291-7080
FAX 337-291-7085

**FAILURE TO
COMPLETE AND RETURN
THIS FORM
WILL RESULT IN AN
INCREASED ASSESSMENT
OF YOUR ASSETS AND
THEREFORE
INCREASED TAXES.**

LAT 12

NOTE:

Equipment located at the well site that you are leasing from another entity must be reported on this form. Please complete the leased equipment section on page 2 of the form.

All equipment reported on this form will be reconciled against photographs of the well site to determine accuracy of your reporting.

Please review and complete the form. **To maintain your right of appeal, this form must be received by our office on or before April 1, 2017.**

Make any corrections, such as business name, address, ownership, business type, etc., on the form. Add or change any and all "Doing Business As" names that are in use. Be sure to furnish complete and accurate information.

If your company is represented by an ad valorem tax firm or individual (other than company accountant, bookkeeper or CPA), the policy of the Lafayette Parish Assessor's Office will be that the following information be on file in our office: (1) Tax preparer's complete company headquarters address, (2) Contact person in the tax preparer's company, their title and phone number, and 3) a notarized copy of authorization for firm or individual to represent the company in property tax matters.

If your business has closed or removed all property from Lafayette Parish before January 1, 2016, please send the effective date of this action, sign the form and return it.

Please call our office if you have any questions or problems concerning the filing of your property form. Your cooperation is greatly appreciated.

CONFIDENTIAL: RS 47:2327: Forms filed by a taxpayer shall be used by assessor, the governing authority, and Louisiana Tax Commission solely for the purpose of administering this statute.

Legal Citation & Instructions: This report shall be filed with the assessor of the parish indicated by April 1st or within forty-five days after receipt, whichever is later, in accordance with RS 47: 2324.

RETURN TO
ASSESSOR, LAFAYETTE PARISH
P.O. BOX 3225
LAFAYETTE, LA 70502-3225

PARISH _____ WARD _____

FIELD NAME AND CODE NUMBER _____

LOCATION
 SECTION _____ TOWNSHIP _____ RANGE _____

OWNER/PERSON TO CONTACT _____ PHONE _____

WARD _____ ASSESSMENT NO. _____

NAME & ADDRESS (INDICATE ANY CHANGES)

SHADED AREA FOR ASSESSOR'S USE ONLY – USE ATTACHMENTS IF NECESSARY

DESCRIPTION OF ALL PROPERTY OWNED IN WARD – SUBMIT SEPARATE REPORT FOR EACH WARD

DESCRIPTION OF WELLS AND/OR SURFACE EQUIPMENT BY LEASE	ACTUAL AGE*	WELL SERIAL NUMBER	LEASE WELL NUMBER	WELL TYPE	ACTIVE LOWER PERF.	FAIR MARKET VALUE	ASSESSED VALUE

SUMMARY OF PROPERTY IN WARD AND FIELD

PROPERTY CLASS	FAIR MARKET VALUE	ASSESSED VALUE	PROPERTY CLASS	FAIR MARKET VALUE	ASSESSED VALUE
_____ WELLS			INVENTORIES		
OIL & GAS EQUIP.			FIELD IMP.		
TANKS			OTHER PROPERTY		
LINES			TOTAL		

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

SIGNATURE AND VERIFICATION

"I declare that under the penalties for filing false reports that this return has been examined by me and 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 Taxpayer

Date

Printed/Typed name of Taxpayer

CONTINUE ON NEXT PAGE

