

**LINCOLN COUNTY
OIL & GAS EXPLORATION
OR SEISMIC ACTIVITIES
PERMIT APPLICATION
PERMIT NUMBER _____**

Name of Applicant: _____

Address: _____

Phone: _____ Date of Application: _____

Name of Landowner: _____

Name of Well: _____

Legal Description: (quarter/quarter section, section/sections, township, range):

Location; (Direction and number of miles to nearest town):

Proposed Date of Commencement is _____, _____

Proposed Date of Completion is _____, _____

Access Route from Main Road: (To be shown on a county map, approval of the route by the Lincoln County Road and Bridge foreman is required.)

Note: The State of Colorado Oil and Gas Commission now provides a copy of their approved permits.

Signature of Applicant: _____

By: _____

PERMIT

This application, when signed by the designated official of the Lincoln County Board of County Commissioners and after a signed copy is furnished to the applicant, is an Oil & Gas Exploration and Seismic Activities Permit.

Approved this _____ day of _____

Signature: _____

Trey James
LAND USE ADMINISTRATOR