ENVIRONMENTAL ORGANIZA	TION REPORT			ENV 2019 FORM OR-1	
	READ TH	E INSTRUCTIONS •	COMPLETE ENTIRE FORM		
1. Purpose of Filing: Initial Filing		Change of Address	/Contact/Officer	2. OOC Code Number:	
	Annual Refiling	Organization Name Change			
3. Type of Operation:	Offshore/Out-of-State Operator Disposal Operator (Type A/B, Transfer Station)		3a. Initial Date of LA Operation:	3b. LA Secretary of State Charter Number:	
	LDEQ Permitted E&P Lan				
4. Current Plan of Organizati	on (Salact ONLY ONE):				
-	-	Corporation - State			
Company		Joint Venture	Trust		
Individual	Partnership	Trade Name	Other:		
6a. Organization - Name & Ma	ailing Address (Must be Entered)		6b. EMERGENCY Contact		
Contact Person for Organization	ı:		Contact Person for Emerge	ency:	
Phone Number:				·	
Fax Number:			Fax Number:		
E-Mail Address (Required):			E-Mail Address (Required):		
6c. Address to which ENVIR	ONMENTAL correspondence shou	Ild be directed:	7. Three Primary Officers	FULL LEGAL NAME (If Individual, only one Officer necessary)	
Mark here if same as 6a			-		
			Title:		
Contact Person:					
Eax Number:			Title:		
E-Mail Address (Required):					
			Address:		
			Title:		
8. If a change of organization name, give previous name, OOC code number and the desir					
Name:		OOC Code N	umber:	Eff. Date:	
	on shall notify this Office, in writin le (11 U.S.C.) by or against. The n			y under any Chapters of Title 11 (Bankruptcy) of ling.	
	RE UNDER PENALTIES AS PRESCRIB IN AND DIRECTION, AND THAT DATA /			RT, THAT THIS REPORT WAS PREPARED BY ME OR HE BEST OF MY KNOWLEDGE.	
PRINTED NAME			TITLE	DATE	
SIGNATURE			TELEPHONE NUMBER		
FOR OFFICE OF	CONSERVATION USE ONLY				
DATE	APPRO\	/ED BY			