

## Louisiana Department of Natural Resources Office of Mineral Resources

Telephone: (225) 342-3374 Email: LeasingSection@la.gov



## **REGISTRATION FORM**

WHO MUST REGISTER: Registration with the Office of Mineral Resources (OMR) is required for the following:

- to submit an application to nominate State-owned lands or waterbottoms for mineral or wind leasing;
- to submit a bid for a mineral or wind lease;
- to apply for an exclusive geophysical agreement; and
- to obtain a working interest in a state mineral lease by assignment, sublease or other conveyance.

ATTACHMENTS: All Corporations and Limited Liability Companies must also provide a "Certificate of Good Standing" obtained from the LOUISIANA Secretary of State's Office, dated in December of the prior year or January (or later) of the current year, along with this Form. A Certificate of Good Standing may be purchased online from the LOUISIANA Secretary of State's website at <a href="http://www.sos.louisiana.gov/app1/paygate/crpinq.jsp">http://www.sos.louisiana.gov/app1/paygate/crpinq.jsp</a>. Partnerships must submit a "Certificate of Existence" which may also be obtained from the LOUISIANA Secretary of State's website at <a href="http://www.sos.louisiana.gov">http://www.sos.louisiana.gov</a>. REGISTRATIONS AND RENEWALS ARE NOT COMPLETE WITHOUT THE REQUIRED CERTIFICATE.

**RENEWALS**: All registrations must be renewed annually on or before January 31 of each year. To renew your registration, please update the information listed below on this Form and submit it to OMR. If the renewal is not received prior to January 31 of each year, the Registrant's name will be removed from OMR's Registration List and will not be awarded a State Lease or approved for Assignment or Transfer after that date. Furthermore, in accordance with Revised Statutes 30:125(B), if the Registrant is a current Mineral Leaseholder and fails to maintain authorization to do business within the State of Louisiana while the Lease is in full force and effect, OMR may levy a penalty in the amount of \$100.00 per day until a copy of the renewed Certificate of Good Standing or Certificate of Existence from the **LOUISIANA** Secretary of State's Office is received by OMR.

| FOR INTERNAL USE ONLY |  |                       |   |  |  |  |  |
|-----------------------|--|-----------------------|---|--|--|--|--|
| DATE FORM RECEIVED:   |  | New Registrant: [     | ] |  |  |  |  |
| OMR ID Number Issued: |  | REGISTRANT RENEWAL: [ | ] |  |  |  |  |

| STEP 1 OF 5                                   | PERTINENT INFOR                    | RMATION  |      |       |          |
|---|------------------------------------|--|------|-------|----------|
| Please list the correct name and address(es). | NAME:                              |  |      |       |          |
|   | PHYSICAL ADDRESS:                  | STREET ADDRESS OR POST OFFICE ADDRESS (LINE 1) |      |       |          |
|   |                                    | STREET ADDRESS OR POST OFFICE ADDRESS (LINE 2) |      |       |          |
|   |                                    |  | Сітү | STATE | ZIP CODE |
|   | MAILING ADDRESS:<br>(IF DIFFERENT) | STREET ADDRESS OR POST OFFICE ADDRESS (LINE 1) |      |       |          |
|   |                                    | STREET ADDRESS OR POST OFFICE ADDRESS (LINE 2) |      |       |          |
|   |                                    |  | Сіту | STATE | ZIP CODE |

| STEP 2 OF 5   | CONTACT INFORMATION  |  |  |
|---|--|--|--|
| Who should be contacted regarding this registration?  | CONTACT NAME:  Person to Contact   |  |  |
|   | TITLE/POSITION:  Title/Position of Contact Person  |  |  |
|   | PHONE NUMBER: ( ) AREA CODE NUMBER   |  |  |
|   | FAX NUMBER: () AREA CODE NUMBER  |  |  |
|   | EMAIL ADDRESS:  Example: Joe@mail.com  |  |  |
| STEP 3 OF 5   | IDENTIFICATION NUMBER  |  |  |
| What is the Federal Employer Identification Number (FEIN) or Social Security Number? Please list one. | FEDERAL EMPLOYER IDENTIFICATION NO.: OR SOCIAL SECURITY NUMBER:  |  |  |
| STEP 4 OF 5   | SUBMISSION   |  |  |
| Where should this Form be submitted?  | OFFICE OF MINERAL RESOURCES LOUISIANA DEPARTMENT OF NATURAL RESOURCES ATTENTION: LEASING SECTION  PHYSICAL ADDRESS: 617 North Third Street 8 <sup>th</sup> Floor Baton Rouge, Louisiana 70802  MAILING ADDRESS: Post Office Box 2827 Baton Rouge, Louisiana 70821-2827  EMAIL ADDRESS: Leasing Section @la.gov Phone: (225) 342-0893 Fax: (225) 242-3376 or (225) 242-3722 |  |  |
| STEP 5 OF 5   | SIGNATURE AND DATE   |  |  |
| Please sign and date this Form before submission.   | SIGNATURE:  DATE:  |  |  |