

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

Name of Applicant: _____

Address: _____

Phone: _____ **Date of Application:** _____

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

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

Proposed date of commencement is _____, _____ and the proposed date of completion is _____, _____.

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

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: _____

**Kenneth Morrison
Land Use Administrator**