

Certificate Request Form

Date: _____

Office of Mineral Resources
P.O. Box 2827
Baton Rouge, LA 70821-2827

Invoice #_____

Invoice Amount_____

Proof of Publication_____

Proof of Timely Execution_____

Proof of No Conflict or Overlap_____

Proof of Three-Mile Boundary_____

Proof of Minutes_____

Lease Sale

State Lease Number

Tract Number

Lease Sale

State Lease Number

Tract Number

Lease Sale

State Lease Number

Tract Number

Information Requested By:

(address)

(phone no.)
