

**Retaining this application request:**  
Operator/Purchaser(s) should retain a certified/approved copy of this application. (K.S.A. 79-4224)

KANSAS DEPARTMENT OF REVENUE  
DIVISION OF TAX OPERATIONS

**MINERAL TAX**

PHONE: 785-368-8222

FAX: 785-296-4993

EMAIL: kdor\_mineral.tax@ks.gov

**OFFICE USE ONLY LEASE CODE**

Approved:  Yes  No

Lease Code No.: \_\_\_\_\_

Date Assigned: \_\_\_\_\_

Customer Rep Initials: \_\_\_\_\_

**LEASE CODE REQUEST APPLICATION**

**(Information needed here is required in order to process your request)**

This can only be emailed to the email address at the top (in the subject line enter Lease Code Request) or faxed to the number above.

Application is hereby made to the Director of Taxation to request a lease code for a well from Kansas Mineral Tax. Application is made with full knowledge of the penalties as prescribed by law. The turnaround time to process your application is 24 – 48 hours. If you are the Operator or Purchaser making this request, you will be responsible for notifying the other party. Please check the appropriate box as to who is applying for the Lease Code.

\_\_\_\_\_  
Current Operator Name

\_\_\_\_\_  
Operator Number

\_\_\_\_\_  
Current Operator Complete Address

\_\_\_\_\_  
Current Operator Email Address

\_\_\_\_\_  
Contact Name and Phone Number

\_\_\_\_\_  
Current First Purchaser Name

\_\_\_\_\_  
Purchaser ID/Mineral Tax Number

\_\_\_\_\_  
Current First Purchaser Complete Address

\_\_\_\_\_  
Current First Purchaser Email Address

\_\_\_\_\_  
Contact Name and Phone Number

**LEASE CODE REQUEST**

**Commodity Type** (check only one):  Oil or  Gas

**Well Name:** \_\_\_\_\_

**Number of Wells:** \_\_\_\_\_ **Note:** Any wells that qualify for New Pool Exemption(s) are required to be issued a single lease code number. (K.S.A. 79-4217 and/or revised Notice 12-02)

**API Number:** \_\_\_\_\_

**County Name:** \_\_\_\_\_

**Legal Description:** Sec. \_\_\_\_\_ Twn. \_\_\_\_\_ Rng \_\_\_\_\_

**Date of First Production** (mm/dd/yyyy): \_\_\_\_\_

**Depth of Well:** \_\_\_\_\_

**COMMENT / REMARKS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

