



PURCHASER OR TAKER'S ANNUAL CRUDE OIL REPORT

PURCHASER OR TAKER (Full name as registered)		PURCHASE YEAR	
ADDRESS (P.O. Box or Street Address)			
CITY		STATE	ZIP CODE
WELL LOCATION			
County:		Town:	Field:
	Owner	Tank Number	Crude Oil (Barrels) Purchase or Transported
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
Remarks:			
<p>I hereby affirm under penalty of perjury that I am _____ (title) of _____ (organization); that I am authorized by that organization to make this report; that this report was prepared under my supervision and direction; and that the information provided in this report is true to the best of my knowledge and belief. I am aware that false statements made in this report are punishable pursuant to Section 210.45 of the Penal Law.</p>			
_____ Signature of Authorized Representative		_____ Print or Type Name of Authorized Representative	
		_____ Date	