

**APPLICATION FOR AUTHORIZATION TO CONDUCT SURVEYS
ON WYOMING STATE TRUST LANDS**

Pursuant to Chapter 16 of the Rules and Regulations of the Board of Land Commissioners

Applicant: _____

Contact Information:

Address: _____

Phone Number: _____

Email: _____

Fax: _____

Location of Surveying Activity (attach additional sheets if necessary):

Description	Section	Township	Range	County	Grazing Lease No.*	Oil & Gas Lease No.**

*Grazing Lease Number(s) for the requested survey area can be found at: <http://slf-web.state.wy.us/surfaceplatbook/>

**Oil & Gas Lease Number(s) for the requested survey area can be found at: <http://slf-web.state.wy.us/subsurfaceplat/>

Describe the proposed survey activity in detail (attach additional sheets as necessary):

Give the duration of the survey activity: _____

Will the proposed survey have potential negative impacts to the fee simple or leasehold estate, including, but not limited to, destruction of forage, disruption of grazing, agricultural, or commercial operations, nuisance, or inconvenience? (i.e increased motorized vehicular use, excavation, construction activity, equipment operation, etc.):

Return completed application to: Office of State Lands and Investments
Trust Land Management Division
122 W. 25th St., Herschler Bldg.
Cheyenne, WY 82002-0600