## REQUEST FOR AUTHORIZATION TO CONDUCT RESEARCH OR EDUCATIONAL ACTIVITIES ON WYOMING STATE TRUST LANDS

Pursuant to W.S. §§ 36-2-101; 36-2-107 and Chapter 16 of the Rules and Regulations of the Board of Land Commissioners

Full Name:
Representing:
Contact Information:
Address:
Phone Number:
Email:
Fax:
Project Name:
Project Location:
County:
List Township(s), Range(s) and section(s) or indicate statewide
List applicable Grazing Lease number or numbers (can be found at: <a href="http://slf-web.state.wy.us/plats/surfaceplatsearch.aspx">http://slf-web.state.wy.us/plats/surfaceplatsearch.aspx</a> )
Is the requested project area under an oil and gas lease? (Can be found at: <a href="http://slf-web.state.wy.us/plat/searchplat.aspx">http://slf-web.state.wy.us/plat/searchplat.aspx</a> )
If yes, Lease #

Describe the proposed activity in dactivity, etc. (attach additional she	letail to include dates requested, type of acti ets as necessary):	vity, level of human —
		_
Will the proposed research / educe excavation, construction activity, e	ational activity result in any surface disturbated in any surface disturbat	nce? (motorized vehicles, _ _
Return completed application to:	Office of State Lands and Investments Trust Land Management Division 122 W. 25 <sup>th</sup> St. Herschler Bldg., 3W Cheyenne, WY 82002-0600	_

To allow adequate time for processing, all applications should be submitted to the Office at least 30 days prior to the planned activity.