



FORM EIA-23
ANNUAL SURVEY OF DOMESTIC OIL AND GAS RESERVES
REPORT YEAR 2003

This report is mandatory under the Federal Energy Administration Act of 1974 (Public Law 93-275). For the provisions concerning the confidentiality of information and sanction statements, see Section VII and VIII of the instructions.

Resubmission?

PART I. IDENTIFICATION

Complete and return by April 15, 2004 to:

Energy Information Administration
U.S. Department of Energy
P O Box 20907
Silver Spring, MD 20907
Attn: Form EIA-23
OR
Fax to: (202) 586-1076/ATTN: FORM EIA-23

Questions? Call 1-800-879-1470

Affix mailing label or enter mailing address

EIA Identification Number: [Grid with 0000]

Company Name:

Street or P.O. Box:

City, State, Zip Code:

EIN:

1. Contact Information (person most knowledgeable about the reported data)

Contact Person (Please Print):

Phone Number: () - Ext.

Fax Number: () -

E-mail Address:

2. Was your company an oil and gas field operator at any time during calendar year 2003? (See definition of an operator, page 1)

- (1) No... Complete only items 3 through 15 below and return this page.
(2) Yes... Complete rest of form.

3. Company Status, Name, and/or Address Change or Correction. (Check appropriate box.)

- Name and address on mailing label are correct.
Change company name, contact person, and/or mailing address, as indicated below.
Company was sold to or merged with company entered below.
Company went out of business. Operations transferred to company entered below.

4. Change Company Name, Address, Employer Identification Number (EIN), and/or Contact Information to:

Company Name:

Street or P. O. Box:

City, State, Zip Code:

EIN:

Contact Person (Please Print):

Phone Number: () - Ext.

Fax number: () -

E-Mail Address:

Comments:

PART II. PARENT COMPANY IDENTIFICATION

5. Is there a parent company which exercises ultimate control over your company?

- (1) No... Answer 12 through 15.
(2) Yes... Answer 6 through 15.

6. Company Name

7. Parent Company EIN

8. Address

9. City

10. State

11. Zip Code

PART III. ATTESTATION (I hereby swear or affirm that I have reviewed this Form EIA-23 report and am familiar with its contents, and that to the best of my knowledge, information, and belief, the information provided and appended is true and complete.)

12. Attestor (Please Print)

13. Title

14. Signature

15. Date

