

**SELF-CERTIFICATION STATEMENT
FROM LESSEE/OPERATOR**

SURFACE OWNER IDENTIFICATION

Federal or Indian Lease Number _____

Well(s) Number and Location _____

I hereby certify to the Authorized Officer of the Bureau of Land Management that I have reached one of the following agreements with the Surface Owner; or after failure of my good-faith effort to come to an agreement of any kind with the Surface Owner, I will provide a bond or comply with State requirements:

- 1) _____ I have a signed access agreement to enter the leased lands;
- 2) _____ I have a signed waiver from the Surface Owner;
- 3) _____ I have entered into an agreement regarding compensation to the Surface Owner for damages for loss of crops and tangible improvements.
- 4) _____ Because I have been unable to reach either 1), 2), or 3) with the Surface Owner, I will obtain a bond to cover loss of crops and damages to tangible improvements.

_____ Because this well is located on non-Federal surface and mineral estate and I have been unable to reach either 1), 2), or 3) with the Surface Owner, I will comply with the North Dakota Oil and Gas Production Damage Compensation requirements (NDCC 38-11.1) or Montana Code, Minerals, Oil and Gas, (Title 82 10 Chapters 10-11); or South Dakota Compensation for Damages from Mining, Oil and Gas Development (Title 45, Chapter 45-5A)

Surface Owner information: (if available after diligent effort)

Surface Owner Name: _____

Surface Owner Address: _____

Surface Owner Phone Number: (_____) _____

Signed this _____ day of _____, 20_____

(Name of Lessee(s)/Operator)