



North Dakota Industrial Commission Department of Mineral Resources Oil & Gas Division

FORMS 5, 5B, 16, 17 and 17A E-FILING AUTHORIZATION

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

This form authorizes the person(s) listed below to access the Department of Mineral Resources E-Filing URL for the purpose of submitting for approval a Form 5, Form 5B (Production), Form 16 (SWD), Form 17 or Form 17A (Enhanced Recovery).

A new authorization will be required if any changes are to be made to the authorized individuals on the form. **All current agents must be listed each time the form is submitted.** (The Authorized Signature person will be put in as the Contact person for the account.)

The data submitted from the e-mail address(es) listed below have been checked and conform to the standards and procedures set forth by the NDIC Department of Mineral Resources.

Authorized Individuals

E-Mail Address

Authorized Signature: _____ Date: _____

Printed Name: _____

Phone: _____ Email Address: _____

Witness Signature: _____ Date: _____

Printed Name: _____