

GAS ASSESSMENT RENDITION

Schedule 2 (Class 2B) (Rev. 12/21)

SHALL BE FILED WITH THE COUNTY APPRAISER BY APRIL 1

County, Kansas

Tax Year 2022

Statement of _____ Operator ID# _____
 P.O. Address _____ City _____ State _____ Zip _____
 Name of Property _____ County ID# _____ KDOR ID#(s) _____ Well API#(s) _____

Section I-Location of Property (required)		Section VII-Abstract Value (for county use only)			
Lease Description		Appraised	Assessed	Penalty	Total
<small>(Well location pg 2)</small>		Total Working Interest (Sec. VI. Line 10)			
Lot Sec. _____ Adn. Twp. _____		Royalty & ORRI Interest (Sec. VI. Line 1)			
Blk Rng. _____ Twp. City _____		Itemized Equipment (Sec. VI. Line 9)			
Tax Unit _____ School Dist _____		Total			

Section II-Well Data (required)					
Producing Well: Pump _____ Flow _____	Non-Producing Well: Shut-In _____ SWD _____ TA _____	Bbls Water per Day _____	Ave Depth _____	SWD Depth _____	
Producing Field Name _____	BTU Content _____	Spud Date: Mo/Yr(new prod) _____	Comp Date: Mo/Yr(new prod) _____	Total WI _____	
() Infill () Commingled () CBM () Horizontal		Total Depth Horizontal _____	Lease Name/Number Tie _____	Total RI _____	
Water Disposal: Hauler/System/Well Name _____ () SWD System _____		Prior Yr Gross Weighted Ave \$/Mcf (Adjusted for BTU Content)			
Address _____ Phone _____		Less Allowable Deductions \$/Mcf (Gathering, Transportation, etc...)			
Gatherer Name _____		Effective Jan 1 Net Price \$/Mcf (Prior Yr Net Weighted Ave Price \$/Mcf)			
Address _____ Phone _____		Effective Jan 1 Net Price \$/Mcf to Royalty Owner			

Section IV-Production Data (required)			Notation	
Year	Cond(Bbls)	Gas(Mcf)	Decline Rate:	
2017	Annual Production			
2018	Annual Production			
2019	Annual Production			
2020	Annual Production			
2021	Annual Production			
Total Production (5 yr cumulative)				
Annual Production (Prior Yr)				
Condensate (Converted to Mcf)			xxxxxxx	
Total Annual Production (Mcf + condensate conversion)				
Condensate Production Data (conversion calculation)				
X / =				
Prod (Bbls) X Net \$/Bbl Oil = Income / Net \$/Mcf Gas = Total Mcf (cond conv)				

Section V-Gross Reserve Calculation (Total 8/8ths Interest)				Schedule (A)	Owner (B)	Appraiser (C)
1. Annual Production - Mcf (Total Annual Prod Sec IV)						
2. Effective Jan 1 Net Price \$/Mcf (Sec II) _____ X market adjust factor _____ adj inc/dec _____						
3. Estimated Gross Income Stream (Multiply Line 1 X Line 2)						
4. Present Worth Factor (Based on Decline Rate-Apply Appropriate Table PWF)						
5. Estimated Gross Reserve Value (Total 8/8ths - Multiply Line 3 X Line 4 - Transfer Total to Section VI, Lines 1 & 2)						

Section VI-Gross Reserve Value X Decimal Interest				Schedule (A)	Owner (B)	Appraiser (C)
1. Royalty & Overriding Royalty Interest Value (Total Sec V, Line 5 X Total RI & ORRI Int) _____ X _____						
2. Working Interest Value (Total Sec V, Line 5 X Total WI Int) _____ X _____ Tbl B Water Credit Adj _____						
3. Deduct Operating Cost Allow for Producing Well						
4a. Deduct Wellhead Compression (Annual Compression Expense) _____ X _____ (Expense Factor-Tbl)						
4b. Deduct Water Expense Allowance (Tbl A Yr Exp; Tbl B Yr Exp if Actual) _____ X _____ (Expense Factor-Tbl)						
4c. Deduct Water Exp Allow Tbl C per SWD Well (SWD Exp per Prod Well if SWD System)						
5. Working Interest Subtotal (Sec VI, Line 2 minus Lines 3, 4a, 4b & 4c)						
6. Working Interest Minimum Lease Value (Sec VI, Line 2) _____ X _____ (% Min Lease Value)						
7. Copy Value from Sec VI, Line 5 or Line 6 (Whichever Line is Greater)						
8a. Add Prescribed Equip Value for Producing Well _____ Flow _____ Pump _____						
8b. Add Prescribed Equip Value for Non-Prod Well (SI, TA, SWD)						
8c. Add Pres Equip Value for Add Equip (Compressors, Gthrg Lines, etc...) _____ X _____ (Equip Fact-Tbl)						
9. Add Itemized Equipment (Section III - Attached Schedule)						
10. Working Interest Total Market Value (Add Sec VI, Lines 7, 8a, 8b, 8c, & 9)						
11. Working Interest Total Assessed Value (Multiply Sec VI, Line 10 X 30%, Unless Lease Qualifies for 25% Rate)						

Current Division Order with Name, Address, Interest of Royalty Owners, and Well/Lease Identifier is a Required Attachment to Rendition

Certification: I do hereby certify that this schedule contains a full and true list of all personal property owned or held by me subject to personal property taxation under the laws of the State of Kansas pursuant to K.S.A. 79-329 through 79-333.

 Owner Date Tax Rendition Preparer Date

Rendition Information: Contact Phone () - Contact Email @

Lease Code _____ County Code _____ Lease Name _____

