

Docket No. _____

STATE OF NEVADA
COMMISSION ON MINERAL RESOURCES
DIVISION OF MINERALS
400 W. King Street, Suite 106
Carson City, Nevada 89703
(775) 684-7040 • Fax (775) 684-7052

AGENCY RECEIPT

**OIL, GAS, AND GEOTHERMAL
APPLICATION FOR HEARING**

1. APPLICATION DATE:		2. APPLICATION SUBJECT (check one):	
		<input type="checkbox"/> Geothermal <input type="checkbox"/> Oil and Gas	
3. HEARING APPLICANT NAME:			
4. HEARING APPLICANT ADDRESS:			
Street or Box Address			
City		State	Zip Code
5: HEARING APPLICANT TELEPHONE:		6. HEARING APPLICANT BUSINESS	
()			
7. USE OR USER PROTESTED:			
Name			
Street or Box Address			
City		State	Zip Code
8. NATURE OF PROTEST:			
9. PURPOSE OF HEARING:			
10. HEARING APPLICANT'S SIGNATURE:			

