

SAFETY NET REPORT Form MMS-4411

PAYOR'S NAME _____
 ADDRESS _____
 CITY/STATE _____ ZIP _____
 PAYOR CODE |_|_|_|_|

REVIEW PERIOD: _____
 NAME OF INDEX ZONE: _____
 INDEX PRICING POINT: _____

YEAR	MONTH	SAFETY NET PRICE (volume weighted average price per MMBtu)	INDEX VALUE (\$/MMBtu)	SAFETY NET DIFFERENTIAL* (\$/MMBtu)
	January			
	February			
	March			
	April			
	May			
	June			
	July			
	August			
	September			
	October			
	November			
	December			

*Please refer to 30 CFR 1206.172(e)(4)(i) for instructions on how to calculate the safety net differential.

Prepared By: _____ Phone No. _____ Date _____

Paperwork Reduction Act of 1995 (PRA) Statement: The PRA (44 U.S.C. 3501 *et seq.*) requires us to inform you that we collect this information to ensure that Indian mineral lessors receive the maximum revenues from mineral resources on their land consistent with the Secretary's trust responsibility. ONRR uses the information to aid in its compliance efforts. Responses are mandatory (30 CFR 1206.172). Proprietary information is protected in accordance with standards established by the Federal Oil and Gas Royalty Management Act of 1982 (30 U.S.C. 1733), the Freedom of Information Act (5 U.S.C. 552(b), (4)), and the Department regulations (43 CFR 2). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. Public reporting burden for this form is estimated to average 3 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Officer of Natural Resources Revenue, Attention: Rules & Regs Team, P.O. Box 25165, Denver, CO 80225-0165.