UNITED STATES DEPARTMENT OF THE INTERIOR

MINERALS MANAGEMENT SERVICE

Gas Cap Production Request

*MMS Region ◉ GOM ○ PAC ○ AK

*Contact Name _____ _____
(First Name) (Last Name)

*Phone Number _____

*Lease Operator (Company) Name _____

*MMS Company Number _____

*Lease Number _____

API Well Number _____

Reservoir Name _____

*Total Payment Amount $4,592.00

*Select Payment Type ○ Credit Card ◉ ACH Debit

Submit Data