A. INSTRUCTIONS

1. This form must be completed and signed by both state land lessee and sublessee.
2. Please attach a copy of your sublease or pasture agreement if such agreement is in writing.
3. Please submit this form for each separate sublease or pasture agreement to the Office of State Lands and Investments, 122 West 25th Street, Herschler Building, Cheyenne, Wyoming 82002. Phone No. (307) 777-6638.

B. TERM OF AGREEMENT: FROM: ________________ TO ________________

C. LAND, LIVESTOCK CARRYING CAPACITY, AND BASE LEASE RENTAL PAYMENTS COVERED BY SUBLEASE OR PASTURE AGREEMENT

<table>
<thead>
<tr>
<th>Hay or Party</th>
<th>Deeded</th>
<th>Private Lease</th>
<th>State</th>
<th>Federal AUM's or Acres</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Acres</td>
<td>Acres</td>
<td>Acres</td>
<td>Acres</td>
<td>Acres</td>
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<tr>
<td>Total</td>
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</tbody>
</table>

1. The lands included in the sublease or pasture agreement (including deeded, state, federal, and private leases) will support _____ Animal Units for _____ months. For purposes of this form, Animal Unit refers to the amount of forage necessary to maintain a cow and her calf, or equivalent, in good physical condition for one year.

D. RENTAL/PAYMENTS DUE UNDER THE AGREEMENT:

1. Total annual rental paid by sublessee under this agreement: $ ________________.
2. If the total rental is to be paid when livestock are removed from the premises, please indicate $ ________________ per head/month.

E. IMPROVEMENTS INCLUDED WITH SUBLEASE OR PASTURE AGREEMENT (CHECK ONLY ONE)

1. No Improvements ☐
2. Water sources and fences ☐
3. Sheds, barns, corrals, water sources and fences ☐
4. Personal residences, sheds, barns, corrals, water sources and fences ☐

STATE LESSEE

NAME: ________________________________
ADDRESS: ________________________________
PHONE: ________________________________

SUBLESSEE

NAME: ________________________________
ADDRESS: ________________________________
PHONE: ________________________________

Signature __________________________ Signature __________________________

USE BACK OF FORM FOR ANY ADDITIONAL REMARKS