Application for Exception to Statewide Rule 32

SECTION 1: APPLICANT AND GENERAL INFORMATION				
2. 3. 4.	Operator P-5 Number: Operator Name: 24-Hour Emergency Contact Number: Operator Address:	6.	Is the operator aware of the "Recommended Lighting Practices" related to flaring in the February 2019 Notice to Operators (see <u>https://rrc.texas.gov/media/50349/notice-to-operators-dark-skies-2-11-2019.pdf</u>) a. □ Yes b. □ No	
	Site Name:	_		
SECTION 2: EXCEPTION TYPE				
1.	 Is this application for a new or a renewal exception (check a. □ New. See Instructions. b. □ Renewal of SWR 32 Exception Number: i. □ Administrative Renewal. See Instructions. ii. □ Hearing Request. See Instructions. 	k one)	?	
SECTION 3: PRODUCING PROPERTY				
1.	 This exception request is associated with the following oil or gas property (choose one): a. Drilling Permit Number: b. Gas ID Number: C. Oil Lease Number: d. Surface Commingle Permit Number: i. Number of commingled properties:(Complete ATTACHMENT 1) e. Gas Plant Serial Number: f. Multiple properties [in the event of a full or partial shut-down of a gas plant, gas gathering system, etc., 			
2. 3.	 as provided for in SWR 32 (h)(8)] i. Number of properties: (Complete ATTACHMENT 1) Number of flares and/or vents associated with this exception: Is this oil and/or gas property connected to a gas gathering or transmission system? a. □ Yes b. □ No. Provide the distance to the nearest pipeline: □ feet or □ miles 			
SE	CTION 4 – REQUESTED RELEASE AUTHORITY	SEC	TION 5 – FLARE/VENT INFORMATION	
1.	Requested Release Rate. See Instructions. a MCF/Day. See Instructions.	and/o	plete ATTACHMENT 2 for multiple flares or vents)	
2.	 i. □ For every day of the calendar month, or ii. □ For days per calendar month. Requested Exception Duration a. Effective Date: b. Expiration Date: i. 	2. R a b 3. R	lare or Vent Name: telease Type (Check one) . □ Flare . □ Vent. <i>See Instructions.</i> telease Height (above ground surface): feet	
3.	 ii. □ permanent Method of Gas Measurement a. □ Orifice Meter b. □ Turbine Meter c. □ Mass Flow Meter d. □ Other Meter: e. □ Estimate [See SWR 27(i)] 	a b c d	telease Location: District: County: °N (decimal degrees preferred) Longitude: °W Datum: i. □ NAD 27 ii. □ NAD 83 iii. □ WGS 84	

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SECTION 6 – COMPLIANCE WITH SWR 36				
 Is the flare/vent facility identified in Section 5 subject to SWR 36 (hydrogen sulfide area)? a. □ Yes 				
	i. Form H-9 Number: ii. H2S Concentration: ppm			
	b. □ No			
2.	If the flare/vent facility is subject to SWR 36, what is nearest public area within 1 mile? aDistance: feet or □ none			
	 b. Type i. □ Dwelling or residential area 			
	ii. □ Public facility such as school or business location			
	iii. □ Public road			
	iv. Other:			
SECTION 7 – RULE-DEFINED NECESSITY FOR RELEASE				
Pursuant to SWR 32(f)(2), the necessity for the release includes the following (check the appropriate box and provide the additional required information as noted in the instructions):				
1.	□ Extended clean-up beyond 10 days [see SWR 32(f)(2)(A)]			
2. 3.	 Unloading excess formation fluid buildup [see SWR 32(f)(2)(B)] Low pressure gas with authorized uses constrained by mechanical, physical, or economic impracticability 			
	[see SWR 32(f)(2)(C)]. See Instructions.			
4.	□ For casinghead gas only, the unavailability of a gas pipeline or marketing facility [see SWR 32(f)(2)(D)]. See Instructions.			
	Requested form of exception (check one):			
	a.			
	b. Administrative approval for up to a 180-day period, in which flaring/venting is limited to 5 days per month.			
	c. C Administrative approval up to 180 days, if gas volume flared is reduced via application of a flare reduction technology. See Instructions.			
	d. Step-out (drilling in undeveloped areas): a) lack of infrastructure for the quality of gas; or b) 2-1/2 miles radius review for pipeline availability; 90-day renewable administrative extensions available for a			
5	maximum of 180 days. □ Avoiding curtailment of gas which will result in a reduction of ultimate recovery [see SWR 32(f)(2)(E)].			
5.	See Instructions.			
6.	Other (check all that apply). See Instructions.			
	 a. □ Insufficient Gas Gathering Capacity b. □ System Upset (Operator) d. □ Scheduled Maintenance e. □ Unscheduled Maintenance 			
	c. □ System Upset (Third Party) f. □ Other			
SECTION 8 – OPERATOR'S CERTIFICATION				
I declare under the penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that: I am authorized				
to make this report; that this report was prepared by me or under my supervision and direction; and that the data and facts stated herein are true, correct and complete, to the best of my knowledge.				
1.	Signature:			
2. 3.	Date: Name of Person (Type or print):			
4.	Title:			
5.	Telephone Number:			
6. The applicant agrees to receive all Railroad Commission of Texas correspondence concerning the administrative review of this application via EMAIL ONLY:				
	a.			
	b. 🗆 No			