

READ INSTRUCTIONS ON BACK

1. OPERATOR NAME, exactly as shown on P-5, Organization Report		2. OPERATOR P-5 NO.		3. RRC DISTRICT NO.	
4. OPERATOR ADDRESS, including city, state, and zip code		5. TYPE OF PROJECT <input type="checkbox"/> Secondary <input type="checkbox"/> Tertiary		6. RRC PROJECT NO.	
		7. METHOD OF RECOVERY BEING USED			
8. DATE(S) OF RRC PROJECT AND AREA DESIGNATION APPROVAL		<input type="checkbox"/> waterflood		<input type="checkbox"/> in situ combustion	
9. DATE ACTIVE OPERATION (INJECTION) BEGAN		<input type="checkbox"/> alkaline (caustic) flooding		<input type="checkbox"/> gas injection	
10. DATE POSITIVE PRODUCTION RESPONSE FIRST OCCURRED		<input type="checkbox"/> cyclic steam injection		<input type="checkbox"/> CO ₂ augmented waterflooding	
11. DATE REQUESTED AS CERTIFICATION DATE (see Inst. No. 3)		<input type="checkbox"/> immiscible CO ₂ displacement		<input type="checkbox"/> microemulsion, or micellar/emulsion, flooding	
13. TOTAL NO. OF ACRES IN PROJECT		14. TOTAL NO. OF LEASES IN PROJECT		<input type="checkbox"/> miscible fluid displacement	
15. FIELD NAME, exactly as on Proration Schedule		<input type="checkbox"/> polymer augmented waterflooding		<input type="checkbox"/> steam drive injection	
		<input type="checkbox"/> other (specify)			
		12. FLUID(S) BEING INJECTED			
		<input type="checkbox"/> brackish water		<input type="checkbox"/> saltwater	
		<input type="checkbox"/> fresh water		<input type="checkbox"/> natural gas	
		<input type="checkbox"/> polymer		<input type="checkbox"/> nitrogen	
		<input type="checkbox"/> other (specify)		<input type="checkbox"/> air	
				<input type="checkbox"/> LPG	
				<input type="checkbox"/> CO ₂	
16. LEASE INFORMATION				Does any well on lease have downhole commingling exception? If YES, list well no., date of exception, and fields commingled.	
LEASE NAME, exactly as on Proration Schedule	RRC LEASE NO.	NO. OF ACTIVE WELLS		<input type="checkbox"/> NO <input type="checkbox"/> YES	
		INJECTION	PRODUCING		
				<input type="checkbox"/> NO <input type="checkbox"/> YES	
				<input type="checkbox"/> NO <input type="checkbox"/> YES	
				<input type="checkbox"/> NO <input type="checkbox"/> YES	
				<input type="checkbox"/> NO <input type="checkbox"/> YES	
				<input type="checkbox"/> NO <input type="checkbox"/> YES	
17. ATTACHMENTS CHECKLIST		<input type="checkbox"/> project and lease production and injection graphs with supporting data. See Inst. No. 2b		<input type="checkbox"/> project plat See Inst. No. 2a	
				<input type="checkbox"/> others as necessary See Inst. No 2c,d	
I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this application, that it 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.					
Signature _____		Title _____			
Name (print or type) _____		Date _____		Phone (____) _____	
RRC USE ONLY					
CERTIFICATION APPLICATION					
<input type="checkbox"/> APPROVED WITH CERTIFICATION DATE OF _____					
<input type="checkbox"/> DENIED <input type="checkbox"/> LACKING					
<input type="checkbox"/> HEARING REQUIRED					
TECHNICAL EXAMINER: _____					
ACTION DATE: _____					