

# REPORT OF INJECTION PROJECT

FOR THE MONTH OF \_\_\_\_\_ 20 \_\_\_\_\_

Operator		Address and Phone Number	
Field Name and Name of Reservoir		County or Counties	
Type of Injection Project	Name of Injection Project	Commission's Order Number Authorizing Project	

WATER ANALYSIS SUBMITTED      YES       NO

FEDERAL, STATE, OR INDIAN LEASE NUMBER, OR LESSOR'S NAME IF FEE LEASE	STATE PERMIT NUMBER	WELL NO.	AVERAGE INJECTION PRESSURE DURING MONTH (PSIA)	WATER INJECTED DURING MONTH (BBLs)	TOTAL WATER INJECTED TO DATE	SOURCE OF INJECTED WATER	DAYS OPERATED
<b>TOTALS</b>							

CERTIFICATE: I, the undersigned, under the penalty of perjury, state that I am the \_\_\_\_\_ of the \_\_\_\_\_ (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**INSTRUCTIONS:**

1. Each operator of an injection project shall furnish information on this form to the Oil and Gas Administrator, Arizona Geological Survey, 416 W. Congress #100, Tucson AZ 85701 not later than the 20th day of the month following the month reported.
2. If several projects are operated jointly, report each project on a separate form.

**STATE OF ARIZONA  
OIL & GAS CONSERVATION COMMISSION**

Report of Injection Project  
File One Copy

Form No. 14