

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 |
|---|---------------------|----------|--|------------------------------------|------------------------------|--------------------------|---------------|
| | | | | | | | |
| TOTALS | | | | | | | |

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.

Mail completed form to:

Oil and Gas Program Administrator
 Arizona Department of Environmental Quality
 1110 W. Washington Street
 Phoenix, AZ 85007

Signature

Date

OR email one copy to: ogcc@azdeq.gov

INSTRUCTIONS:

1. Each operator of an injection project shall furnish information on this form to the Oil and Gas Program Administrator, at the address above, 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