

MONTHLY PRODUCER'S REPORT

Field _____

County _____

Field Office Address _____

Month _____ 20 _____

Company

Address

Federal, State, or Indian Lease Number or Lessor's Name if Fee Lease	Well No.	State Permit No.	Status (code)	Code - Oil (O)	Code - Condensate (C)	Actual Bbls. Oil Produced	Bbls. Water Produced	Gas Produced MCF	Days Produced	Disposition of Gas - MCF				Disposition of Oil - Bbls.					
										Sold	Other		Purchaser Code	Oil on Hand Beg. of Month	Bbls. to Transporter	Other		Purchaser Code	Oil on Hand End of Month
Code	Code	Code	Code																

STATUS CODE

- F -- Flowing
- P -- Pumping
- G -- Gas Lift
- S -- Shut In
- T -- Temp. Abandoned
- I -- Injection

"OTHER" GAS DISPOSITION CODE

- G -- Gas Lift
- L -- Lost (MCF Estimated)
- E -- Explanation Attached
- R -- Repressuring or Pressure Maintenance
- U -- Used on Lease
- V -- Vented

"OTHER" OIL DISPOSITION CODE

- C -- Circulating Oil
- L -- Lost
- S -- Sedimentation (BS&W)
- E -- Explanation Attached

I hereby certify that the information given is true and complete to the best of my knowledge.

Signature _____
Date

Position

PURCHASER CODES

	Code No.	Name
OIL:	105	Western Refining SW
	106	Teppco
GAS:	204	Western Gas Resources, Inc.
He:	206	Shiprock Helium LLC

Mail completed form by the 25th day of the month following production to:

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

OR email one copy to: ogcc@azdeq.gov

STATE OF ARIZONA
OIL & GAS CONSERVATION COMMISSION
Monthly Producer's Report
File One Copy

Form No. 16