

# RAILROAD COMMISSION OF TEXAS

CERT

## ADMINISTRATION DIVISION CENTRAL RECORDS DEPARTMENT REQUEST FOR RECORDS

Date: \_\_\_\_\_ R- \_\_\_\_\_

|                        |        |      |                    |  |
|------------------------|--------|------|--------------------|--|
| Company/Person's Name: |        |      | Rec'd By:          |  |
| Address:               |        |      | Contact Person:    |  |
| City:                  | State: | Zip: | Phone No:<br>( ) - |  |
| E-Mail:                |        |      | Fax No:<br>( ) -   |  |

| Type of Records Needed                          |   |                     |                                       |
|---|---|---------------------|---------------------------------------|
| <input type="checkbox"/> Oil & Gas Well Records | <input type="checkbox"/> Production Records: Beginning Date | to Ending Date      | <input type="checkbox"/> See Attached |
| <input type="checkbox"/> Hearing Files          | Docket No.  | Fluid Injection No. |                                       |
| Additional Info:                                |   |                     |                                       |

| Well Information                                |         |              |               |                                   |
|---|---------|--------------|---------------|-----------------------------------|
| Dist:   | County: | Oil Lse. No. | Gas ID No.    | <input type="checkbox"/> Dry Hole |
| Operator Name:                                  |         |              | Operator No.  |                                   |
| Lease Name:                                     |         |              | Well No.      |                                   |
| Field Name:                                     |         |              |               |                                   |
| Location: (Sec. Blk. Survey Name, Abstract No.) |         |              |               |                                   |
| API No. 42- -                                   |         | Permit No.   | Date Drilled: |                                   |
| Additional Info:                                |         |              |               |                                   |

| Well Information                                |         |              |               |                                   |
|---|---------|--------------|---------------|-----------------------------------|
| Dist:   | County: | Oil Lse. No. | Gas ID No.    | <input type="checkbox"/> Dry Hole |
| Operator Name:                                  |         |              | Operator No.  |                                   |
| Lease Name:                                     |         |              | Well No.      |                                   |
| Field Name:                                     |         |              |               |                                   |
| Location: (Sec. Blk. Survey Name, Abstract No.) |         |              |               |                                   |
| API No. 42- -                                   |         | Permit No.   | Date Drilled: |                                   |
| Additional Info:                                |         |              |               |                                   |

| Charges (For RRC use only)  |                |                                       |  |
|---|----------------|---------------------------------------|--|
| Copies: (paper) _____ @ \$.10 = \$ _____ (micro) _____ @ \$.10 = \$ _____   | Total \$ _____ | <b>Other Charges</b><br>\$ _____      |  |
| Certifications _____ @ \$1.00 = \$ _____                                    | Total \$ _____ |                                       |  |
| Over Size Copies (maps / logs) _____ @ \$.40 per sq. ft. = \$ _____         | Total \$ _____ | Date Called<br>_____                  |  |
| GIS Maps Plots No. _____ = \$ _____   | Total \$ _____ | <b>Paid by:</b>                       |  |
| Computer Generated Reports Set up Fee _____ @ \$6.10 / No. _____ = \$ _____ | Total \$ _____ | <input type="checkbox"/> Credit Card  |  |
| Postage Weight _____  | Total \$ _____ | <input type="checkbox"/> Check        |  |
| Research Fee _____ @ \$5.00 per half hour = \$ _____                        | Total \$ _____ | <b>Total Charges Due:</b><br>\$ _____ |  |
| Labor Charge _____ @ \$6.00 per 20 min. = \$ _____                          | Total \$ _____ |                                       |  |

|                       |                  |                       |                                     |
|-----------------------|------------------|-----------------------|-------------------------------------|
| Date Picked Up: _____ | Worked By: _____ | Date Completed: _____ | Total Time: _____                   |
| Notes:                |                  |                       |                                     |
|                       |                  |                       | Prints Mailed By: _____ Date: _____ |

Email completed form to [ims@rrc.texas.gov](mailto:ims@rrc.texas.gov) or fax to (512) 463-7200. For questions/comments contact the Open Records @ (512) 463-6882.

|  |   |                     |                      |                                       |
|--|---|---------------------|----------------------|---------------------------------------|
| <b>Company/Persons Name:</b>                           |   |                     |                      |                                       |
| <b>Contact Person:</b>                                 |   |                     |                      | <b>Phone No:</b><br>(    )    -       |
| <b>Type of Records Needed</b>                          |   |                     |                      |                                       |
| <input type="checkbox"/> Oil & Gas Well Records        | <input type="checkbox"/> Production Records: Beginning Date                      to Ending Date |                     |                      | <input type="checkbox"/> See Attached |
| <input type="checkbox"/> Hearing Files                 | Docket No.  |                     | Fluid Injection No.  |                                       |
| <b>Well Information</b>                                |   |                     |                      |                                       |
| <b>Dist:</b>   | <b>County:</b>  | <b>Oil Lse. No.</b> | <b>Gas ID No.</b>    | <input type="checkbox"/> Dry Hole     |
| <b>Operator Name:</b>                                  |   |                     |                      | <b>Operator No.</b>                   |
| <b>Lease Name:</b>                                     |   |                     |                      | <b>Well No.</b>                       |
| <b>Field Name:</b>                                     |   |                     |                      |                                       |
| <b>Location: (Sec. Blk. Survey Name, Abstract No.)</b> |   |                     |                      |                                       |
| <b>API No. 42-</b> -                                   |   | <b>Permit No.</b>   | <b>Date Drilled:</b> |                                       |
| <b>Additional Info:</b>                                |   |                     |                      |                                       |
| <b>Well Information</b>                                |   |                     |                      |                                       |
| <b>Dist:</b>   | <b>County:</b>  | <b>Oil Lse. No.</b> | <b>Gas ID No.</b>    | <input type="checkbox"/> Dry Hole     |
| <b>Operator Name:</b>                                  |   |                     |                      | <b>Operator No.</b>                   |
| <b>Lease Name:</b>                                     |   |                     |                      | <b>Well No.</b>                       |
| <b>Field Name:</b>                                     |   |                     |                      |                                       |
| <b>Location: (Sec. Blk. Survey Name, Abstract No.)</b> |   |                     |                      |                                       |
| <b>API No. 42-</b> -                                   |   | <b>Permit No.</b>   | <b>Date Drilled:</b> |                                       |
| <b>Additional Info:</b>                                |   |                     |                      |                                       |
| <b>Well Information</b>                                |   |                     |                      |                                       |
| <b>Dist:</b>   | <b>County:</b>  | <b>Oil Lse. No.</b> | <b>Gas ID No.</b>    | <input type="checkbox"/> Dry Hole     |
| <b>Operator Name:</b>                                  |   |                     |                      | <b>Operator No.</b>                   |
| <b>Lease Name:</b>                                     |   |                     |                      | <b>Well No.</b>                       |
| <b>Field Name:</b>                                     |   |                     |                      |                                       |
| <b>Location: (Sec. Blk. Survey Name, Abstract No.)</b> |   |                     |                      |                                       |
| <b>API No. 42-</b> -                                   |   | <b>Permit No.</b>   | <b>Date Drilled:</b> |                                       |
| <b>Additional Info:</b>                                |   |                     |                      |                                       |
| <b>Additional Information</b>                          |   |                     |                      |                                       |
|  |   |                     |                      |                                       |
|  |   |                     |                      |                                       |