### OIL WELL STATUS REPORT

**RAILROAD COMMISSION OF TEXAS**

Oil and Gas Division

P.O. Box 12967
Austin, Texas 78711-2967

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**INSTRUCTIONS**

- **FIELD NAME**
  - * LEASE NAME
- **LEASE NO.**
- **WELL NO.**
- **DATE TESTED MO/DA/yr**
- **OIL PRODUCED (BBL/DAY)**
- **WATER PRODUCED (BBL/DAY)**
- **GAS PRODUCED (MCF/DAY)**
- **SHUT-IN X**

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**CERTIFICATION:** I declare under penalties prescribed in Texas Natural Resources Code, Sec. 91.143, that I am authorized to make this report, that this report was prepared by me or under my supervision and direction, and that data and facts herein are true, correct, and complete to the best of my knowledge.

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**Signature:**

**Title:**

**Phone:**

**Date:**

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* AN ASTERISK PREPRINTED ON A SURVEY IDENTIFIES WELL SUBJECT TO COMMINGLE TEST REQUIREMENTS

X AN X IS PLACED IN THE SHUT-IN BLOCK TO INDICATE THE WELL IS SHUT-IN