## INJECTION WELL DATA (attach to Form H-1)

### 1. Operator Name (as shown on P-5)

### 2. Operator P-5 No.

### 3. Field Name

### 4. Field No.

### 5. Current Lease Name

### 6. Lease/Gas ID No.

### 7. Lease is _______ miles in a ______ direction from _______ (center of nearest town).

### 8. Well No.

### 9. API No.

### 10. UIC No.

### 11. Total Depth

### 12. Date Drilled

### 13. Base of Usable Quality Water (ft)

### 14. (a) Legal description of well location, including distance and direction from survey lines:

### (b) Latitude and Longitude of well location, if known (optional) Lat. ____________ Long. ____________

### 15. New Injection Well ☐ or Injection Well Amendment ☐ Reason for Amendment: Pressure ☐ Volume ☐ Interval ☐ Fluid Type ☐

Other (explain) ___________________________________________________

### 16. Surface

### 17. Intermediate

### 18. Long string

### 19. Liner

### 20. Tubing size

### 21. Tubing depth

### 22. Injection tubing packer depth

### 23. Injection interval

### 24. Cement Squeeze Operations (List all) Squeeze Interval (ft) No. of Sacks Top of Cement (ft)

### 25. Multiple Completion? Yes ☐ No ☐

### 26. Downhole Water Separation? Yes ☐ No ☐

NOTE: If the answer is “Yes” to Item 25 or 26, provide a Wellbore Sketch

### 27. Fluid Type

### 28. Maximum daily injection volume for each fluid type (rate in bpd or mcf/d)

### 29. Estimated average daily injection volume for each fluid type (rate in bpd or mcf/d)

### 30. Maximum Surface Injection Pressure: for Liquid ____________ psig for Gas ____________ psig.

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### (b) Latitude and Longitude of well location, if known (optional) Lat. ____________ Long. ____________

### 15. New Injection Well ☐ or Injection Well Amendment ☐ Reason for Amendment: Pressure ☐ Volume ☐ Interval ☐ Fluid Type ☐

Other (explain) ___________________________________________________

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NOTE: If the answer is “Yes” to Item 25 or 26, provide a Wellbore Sketch

### 27. Fluid Type

### 28. Maximum daily injection volume for each fluid type (rate in bpd or mcf/d)

### 29. Estimated average daily injection volume for each fluid type (rate in bpd or mcf/d)

### 30. Maximum Surface Injection Pressure: for Liquid ____________ psig for Gas ____________ psig.
1. File as an attachment to Form H-1 to provide injection well data for each application for a new injection well permit or to amend an injection well permit.

2. Complete the current field name and number (Items 3 and 4) with the current field designation in Commission records.

3. Complete the current lease name and number (Items 5 and 6) with the current lease identification in Commission records for each well in the application. Use separate H-1A Forms for each lease.

4. Provide the current well number(s) for existing wells in Item 8. Provide the proposed well numbers for wells that have not yet been drilled.

5. Check in Item 15 the appropriate box for a new injection well permit or an amendment to an injection well permit. If an amendment, check the appropriate boxes for the reason(s) for the application(s) for amendment. If “other” is checked, provide a brief explanation.

6. Provide complete well construction information (Items 16 through 26), including all proposed re-completion (e.g. liner, cement squeeze, tubing, packer). Attach additional sheets if necessary. For Item 19, if the liner was not to the surface, indicate both the top and the bottom depth of the liner as the “Setting Depth.”