

CERTIFICATION OF SURFACE EQUIPMENT REMOVAL FOR AN INACTIVE WELL

Form W-3C

(Rev. XX/2026)

READ INSTRUCTIONS ON BACK

1. OPERATOR NAME exactly as shown on P-5, Organization Report	2. OPERATOR ADDRESS including city, state and zip code
3. OPERATOR P-5 NO.	

- If you are filing for a single well:

4. LEASE NAME as shown on Proration Schedule	5. FIELD NAME as shown on Proration Schedule
6. API NUMBER 42-	7. RRC DISTRICT NO. 8. OIL LEASE / GAS ID NO. 9. WELL NO. 10. COUNTY

OR

- If you are filing for an attached listing of wells:

I, the undersigned, certify that: (check all that apply)		Required for:
<input type="checkbox"/> A	electric service to the production sites for the well(s) identified above has been physically terminated, or the sites do not have electrical service. (See instructions.)	a well or wells which have been inactive for 12 months or longer.
<input type="checkbox"/> B1	all piping, tanks, vessels, and equipment associated with and exclusive to the well identified above have been emptied or purged of production fluids; OR	a well or wells that have been inactive for at least five (5) years but less than ten (10) years.
<input type="checkbox"/> B2	the operator owns the surface of the land where the well(s) is located.	
<input type="checkbox"/> C1	<p>all surface equipment and related piping, tanks, tank batteries, pump jacks, headers, fences, and firewalls associated with and exclusive to the well(s) identified above have been removed, all open pits associated with and exclusive to the well(s) identified above have been closed and all junk and trash, as defined by Commission rule, have been removed; and</p> <p>all equipment associated with providing electric service to the well's production site, except for equipment owned by an electric utility, as defined by Section 31.002, Utilities Code, have been removed*; OR</p>	<p>a well or wells that have been inactive for at least ten (10) years.</p> <p>* for additional information regarding wells identified as inactive more than 10 years as of 9/1/10, please see instructions and/or SWR 15(i)</p>
<input type="checkbox"/> C2	the operator owns the surface of the land where the well is located; OR	
<input type="checkbox"/> C3	the well is part of a Commission recognized EOR project and the equipment remaining on the lease is solely associated with current and future operations of the project.	
<input type="checkbox"/> D	I am unable to comply with the surface equipment cleanup/removal requirements due to safety concerns or required maintenance of the well site. I have attached a written affirmation of the facts regarding the safety concerns or maintenance and request a temporary exception. (Fee set under Rule 78, Tex. Nat. Res. Code §81.0521 & Tex. Nat. Res. Code §81.070) (\$375.00 fee per well)	See instructions and/or SWR 15(i)(3).

CERTIFICATION: I declare that the above certification(s) are based on my personal knowledge of the physical condition of the inactive well identified in this application, that this report was prepared by me or under my supervision or direction, and that I am authorized to make this report. I further acknowledge that this certification is made pursuant to the provisions of Texas Natural Resources Code Section 91.143, which relates to false filings of Commission reports, and provides for the Commission to levy an administrative penalty of up to \$1,000.00 for each false filing. I further acknowledge that this certification is made pursuant to Texas Natural Resources Code Section 89.029, which relates to false filings under option C1 of this application, and provides for the Commission to levy an administrative penalty of up to \$25,000 for each false filing.

Signature _____

Name (print or type) _____

Title _____

Date _____

Phone No. _____

Contact Person and Phone Number if different from above: _____

Reference: Statewide Rule 15

Instructions:

File Form W-3C as required by Oil & Gas Statewide Rule 15 (16 Tex. Admin. Code §3.15) to certify that an operator has fulfilled the requirements related to surface equipment removal for an inactive well. A person with personal knowledge of the physical condition of the inactive well must state the following:

- A. for wells that have been inactive for 12 months or longer, that the operator has physically terminated electric service to the well's production site;
- B. if the operator does not own the surface of the land where the well is located, and the well has been inactive for at least five years but for less than 10 years as of the date of renewal of the operator's organization report, that the operator has emptied or purged of production fluids all piping, tanks, vessels, and equipment associated with and exclusive to the well;
- C. if the operator does not own the surface of the land where the well is located, and the well has been inactive for at least 10 years as of the date of renewal of the operator's organization report, that the operator has removed all surface equipment and related piping, tanks, tank batteries, pump jacks, headers, fences, and firewalls; has closed all open pits; and has removed all junk and trash, as defined by Commission rule, associated with and exclusive to the well.

All items on this form should be typed or clearly printed in blue or black ink.

Detailed Item Instructions:

Items 4 through 10:

If you are filing Form W-3C for a single well, then enter all information for Items 4 through 10. Item 11 should be left blank when filing for a single well.

If you wish to certify multiple wells on a single filing, then please prepare the listing of wells to be attached as shown below. Items 4 through 10 should be left blank; the number of wells and the number of pages for the attached listing should be entered in Item 11.

Item 11: Attached Listing.

If you prefer to attach a listing showing the wells to which the certification applies, then the listing must conform to the following requirements

- A. The listing should be clearly typed or printed in blue or black ink, and should be double-spaced.
- B. The listing should identify wells by API Number, RRC District, Oil Lease/Gas ID Number, Well Number, and County.
- C. Each page of the listing should indicate that it is "Page ____ of ____" where the first blank indicates the page number, and the second blank should show the total number of pages.
- D. The person making the certification should personally initial each page of the listing in the bottom right corner.

Physical termination of electric service to the well's production site: disconnection of the electric service to an inactive well site at a point on the electric service lines most distant from the production site toward the main supply line in a manner that will not interfere with electrical supply to adjacent operations, including cathodic protection units.

Temporary exemption to requirement: An operator may be eligible for a temporary exception to the surface equipment removal requirements if the operator is unable to comply with the requirements because of safety concerns or required maintenance of the well site. **THE OPERATOR MUST INCLUDE A WRITTEN AFFIRMATION OF THE FACTS REGARDING THE SAFETY CONCERNS OR MAINTENANCE.** Pursuant to Tex. Nat. Res. Code §81.0521, and Rule 78, a \$375.00 non-refundable fee is required for each exception to a Commission rule.