

RAILROAD COMMISSION OF TEXAS -- OIL AND GAS DIVISION

Form H-1A

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 <input type="checkbox"/> or Injection Well Amendment <input type="checkbox"/>					Reason for Amendment: Pressure <input type="checkbox"/> Volume <input type="checkbox"/> Interval <input type="checkbox"/> Fluid Type <input type="checkbox"/>					
Other (explain) _____										
Casing	Size	Setting Depth		Hole Size	Casing Weight	Cement Class	# Sacks of Cement	Top of Cement	Top Determined by	
16. Surface										
17. Intermediate										
18. Long string										
19. Liner										
20. Tubing size		21. Tubing depth		22. Injection tubing packer depth			23. Injection interval _____ to _____			
24. Cement Squeeze Operations (List all)				Squeeze Interval (ft)			No. of Sacks		Top of Cement (ft)	
25. Multiple Completion? Yes <input type="checkbox"/> No <input type="checkbox"/>				26. Downhole Water Separation? Yes <input type="checkbox"/> No <input type="checkbox"/>			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.										
8. Well No.		9. API No.		10. UIC No.		11. Total Depth		12. Date Drilled		13. Base of Usable Quality Water (ft)
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25. Multiple Completion? Yes <input type="checkbox"/> No <input type="checkbox"/>				26. Downhole Water Separation? Yes <input type="checkbox"/> No <input type="checkbox"/>			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.										

FORM H-1A INSTRUCTIONS

05/2004

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."