



**Reservoir Dewatering Project (OAC 165:
 Excessive Water Exemption Affidavit (OAC 165:10-15-17)
 Reservoir Dewatering Oil Spacing Unit (OAC 165:10-15-18)**

INSTRUCTIONS:

1. Type or print using black ink.
2. Use a separate form for each well tested. Attach Form 1030,1002A or 1535 depending on type of application.
3. List water, gas and oil produced each for seven consecutive days.
4. The effective date of the allowable shall be when the Division accepts the test, but cannot be before a filing date.
5. Disposal of salt water in violation of OCC rules is subject to contempt proceedings.

| | | | | | |
|---------------------------|-------|------|-------------------|------|--------------------|
| Operator | | | E-mail Address | | OCC No. |
| Address | | | | | Phone No. |
| City | State | | Zip | | FAX No. |
| Well Name/No. | | | API No. | | OTC Prod. Unit No. |
| Project Name | | | Project Order No. | | Date of 1st Prod. |
| SHL: Location within Sec. | | Sec. | Twp. | Rge. | County |
| BHL: Location within Sec. | | Sec. | Twp. | Rge. | County |
| Formations/Perforations | | | | | |
| Oil Purchaser/No. | | | Gas Measurer/No. | | |

No. Project Wells (List on Reverse) _____ Is production metered together? Yes No

| | | | |
|----------------------------------|-----------------|---------------------------|-------------------|
| <input type="checkbox"/> Pumping | Choke/Pump Size | Saltwater Disposal Method | Authorizing Order |
| <input type="checkbox"/> Flowing | | | |

| TEST | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 | TOTAL |
|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| DATE | | | | | | | | |
| OIL | | | | | | | | |
| GAS | | | | | | | | |
| WATER | | | | | | | | |

Project well list (for additional wells attach additional sheet)

| API NO. | WELL NAME/NO. | LOCATION SEC-TWP-RGE | FORMATION | DATE OF 1ST PROD. |
|---------|---------------|-------------------------|-----------|----------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

FALSIFICATION OF THIS REPORT IS SUBJECT TO PENALTY, O.S.L. 1933.

The operator has given twenty-four (24) hour notice of the opportunity to witness said initial test to the Conservation Division and the offset operator producing from the same formation. No waiver or signature of Conservation Division personnel is required (OAC 10-15-17-(a)). Return receipt of mailing is acceptable in lieu of offset operator's signature.

 Applicant Signature Title Date

CORPORATION COMMISSION REPRESENTATIVE

OFFSET OPERATOR

 Name & Title (Print or Type) Name & Title (Print or Type)

 Date Date