

### Application for Order or Permit for Simultaneous Injection Well

Operator \_\_\_\_\_ OTC # \_\_\_\_\_  
Address \_\_\_\_\_ Date Received \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Date Approved \_\_\_\_\_

Well Name/No. \_\_\_\_\_ API # \_\_\_\_\_ **Permit No.** \_\_\_\_\_

Location	Section:				Township:	Range:
SHL:	1/4	1/4	1/4	1/4		
BHL:	1/4	1/4	1/4	1/4		
County	Unit Order No.					

Approved by: \_\_\_\_\_

(Note: Order or Permit expires if the operator fails to perform the initial radioactive tracer survey on the well and submit the results of the survey to the UIC Department within 18 months after the effective date of the Order or Permit.)

Unit Name \_\_\_\_\_

**OAC 165:10-5-15 addresses applications for Orders or permits for, and operation of, simultaneous injection wells.**

**The applicant submits the following information:**

Names and addresses to whom copies of this application have been sent.


Well to be drilled    Well to be converted    Enhanced Recovery Injection Well    Noncommercial Disposal Well    Directional (Provide BHL)

Geologic name and perforated interval of <b>producing</b> zone:		
Geologic name and perforated interval of <b>injection</b> zone:		
Base of Treatable Water:	Present static fluid level:	Total Depth:
<b>Rate:</b>	<b>Injection Pressure:</b>	PBTD:

How will rate and pressure be calculated?

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I declare that I have knowledge of the contents of this application and am authorized by my organization to make this application, which was prepared by me or under my supervision and direction with the data and facts stated herein to be true, correct and complete to the best of my knowledge and belief.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name & Title (Typed or Printed) \_\_\_\_\_ Phone \_\_\_\_\_

***Instructions for Form 1015SI***

1. Attach an affidavit of mailing with names and addresses of those to whom the completed Form 1015SI was mailed, and the date of mailing. Operators of producing leases within 1/2 mile of the subject well shall be included on the list of those to whom the completed Form 1015SI is mailed.
2. Applicant must have surety and a current Form 1006B Operators Agreement on file with the Oil and Gas Conservation Division prior to the UIC Department's approval of the permit, or issuance of an order for the well.
3. Attach a current Form 1002A Completion Report for the well and an approved Transfer Authority to Inject Form 1073I if the applicant is not shown as the operator of the well on the Form 1002A.
4. Attach a representative wire-line log for the subject well.
5. Attach a schematic diagram of the wellbore, including, but not limited to, all casing and tubing strings, cemented intervals, packers, producing and injection perforations, and plugs and pumps.
6. Attach a plat containing the information required in [OAC 165:10-5-15(b)(1)(C)] and a corrective action plan, if applicable.
7. The application and one set of attachments shall be e-mailed Oklahoma Corporation Commission UIC Department at [occcentralprocessing@occ.ok.gov](mailto:occcentralprocessing@occ.ok.gov) or mailed to the, Oil and Gas Conservation Division at or delivered to the Corporation Commission, Oil and Gas Conservation Division, ATTN: UIC Department, P. O. Box 52000, Oklahoma City, Ok, 73152-2000.
8. The application will be reviewed administratively by the UIC Department if no written protest is received within 15 days of applicant's mailing of the Form 1015SI.
9. The well shall not be used as a simultaneous injection well until the operator performs a radioactive tracer survey on the well which is acceptable to the UIC Department. Mechanical integrity will be demonstrated by the operator performing a radioactive tracer survey on the well before the well is operated as a simultaneous injection well, and thereafter on an annual basis, reflecting that the injection fluids are going into the authorized zone(s). The radioactive tracer surveys must be submitted to the UIC Department within 7 days of the performance of the surveys, and the results of the surveys must be acceptable to the UIC Department before the well can be used as a simultaneous injection well.[165:10-5-15(b)(3)(B)]
10. The operator is required to file a Form 1002A Completion Report or an amended Form 1002A Completion Report within 60 days of completion or recompletion of the well. The operator is also required to submit Form 1012 for the well to the UIC Department by January 31 of each year for the previous calendar year, and the filing fee specified in [OAC 165:5-3-1(b)(1)(T)].
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