Form No. 5 R10/98

MBOGC

Montana Board of Oil & Gas Conservation
1625 11th Avenue
P.O. Box 201601
Helena, MT 59620-1601

Report of Subsurface Injection

ARM 36.22.307, 36.22.1242, 36.22.1414, & 36.22.1415

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Supplemental Page(s)

For Month of: _____
Month Year

Operator: _____ Field: _____ Unit/Lease Name: _____

API Well Number	Well Name and Number	Sec.	Twp.	Rge.	Days Inj.	Monthly Injection Volume (Bbls or MCF)	Maximum Injection Rate (Bbls per day or MCF per day)	Total Cumulative Injection (Bbls or MCF)	Max. Inj. Pressure (psig)	Avg. Inj. Pressure (psig)	Maximum Annulus Pressure (psig)	Average Annulus Pressure (psig)

Note: Mail three (3) copies of this report to the Montana Board of Oil and Gas Conservation at Helena, Montana, on or before the last day of each month following the month covered by the report. Separate report(s) must be filed covering each injection or disposal project.