

**MBOGC**

Montana Board of Oil & Gas Conservation  
 2535 St. Johns Ave  
 Billings, Montana 59102

**Report of Subsurface Injection**

(Submit in duplicate)

ARM 36.22.307 and ARM 36.22.1415

For Month of: \_\_\_\_\_  
 (Month and Year)

**For Board Use Only**

Operator Number: \_\_\_\_\_

Injection Codes: \_\_\_\_\_

Operator: \_\_\_\_\_

County: \_\_\_\_\_

Check if Amended Report:

Field: \_\_\_\_\_

Unit/Lease Name: \_\_\_\_\_

Injection Fluid Type: \_\_\_\_\_

Fluid Source: \_\_\_\_\_

Project Type: \_\_\_\_\_

Formation Injected into: \_\_\_\_\_

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

Remarks: \_\_\_\_\_

Agent's Signature: \_\_\_\_\_  
 Agent's Name: \_\_\_\_\_  
 Title: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_

Note: Mail two (2) copies of this report to the Montana Board of Oil and Gas Conservation at Billings, 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.