



**FOR OGCC USE ONLY**

## ACCIDENT REPORT

**As required by Rule 602.b.**

**Report taken by:**

**DESCRIPTION OF ACCIDENT** (Please be as specific as possible)

<b>Name of Operator:</b> _____ <b>Date of Incident:</b> _____ <b>Type of Facility (well, tank battery, flow line, pit):</b> _____ <b>Well Name and Number:</b> _____ <b>API Number:</b> _____ <b>Connect to Accident (land owner, royalty owner, etc.):</b> _____	<b>Location</b> <b>County:</b> _____ <b>Field Name:</b> _____ <b>QtrQtr:</b> _____ <b>Section:</b> _____ <b>Township:</b> _____ <b>Range:</b> _____ <b>Meridian:</b> _____
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**Provide a detailed description of the accident, problem, and cause (equipment failure, human error, etc.):**

## OTHER NOTIFICATIONS

List the parties and agencies notified (County, BLM, EPA, DOT, Local Emergency Planning Coordinator or other).

Date	Agency	Contact Person	Response

**Accident Tracking No:** \_\_\_\_\_