



FOR OGCC USE ONLY

Doc# 402948936

☐ Check if data is revised. Report only revised wells

Fax

*WATER DISPOSAL CODES:

M = Commercial Disposal

$P = P_{it}$

C = Central Disposal

I = Infected

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

William D Black
Signed

President
Title (Please Print)

Date (MM/DD/YYYY) 02 / 03 / 2022