



TYPE OR PRINT USING DARK INK
 * **READ INSTRUCTIONS ON BACK**

MONTHLY PRODUCTION REPORT

Form PR
 02/2005 WWW



Operator Name _____

Operator Address _____

City _____ State _____ Zip _____

RAILROAD COMMISSION OF TEXAS

Oil and Gas Division
 (1701 N. Congress)
 P.O. Box 12967 – Capitol Station
 Austin, Texas 78711-2967

<http://www.rrc.state.tx.us>

P-5 Operator No. RRC Dist No.

Production Month/Year

Page _____ of _____
 Fill here if CORRECTED REPORT

EXACTLY AS SHOWN ON RRC RECORDS (If multiple Volumes/Codes exist, put them on the next line)				OIL/CONDENSATE (whole barrels) – Total for Month * SEE BACK FOR EXPLANATION OF DISPOSITION CODES *					CASINGHEAD GAS/GAS WELL GAS (MCF) – Total for Month			
Field Name (list alphabetically) Lease Name (for gas, provide well #) 1	O/G/P [Oil/Gas/ Pending] 2	RRC Identifier [Lease/Gas ID/ Drill Permit/API#] 3	Commingling Permit # or LSE Total (T) 4	On hand, beginning of month 5	Production 6	Disposition		On hand, end of month 9	Formation Production 10	Disposition		
						Volume 7	Code 8			Volume 11	Code 12	
DO NOT WRITE IN THIS AREA				DO NOT WRITE IN THIS AREA					DO NOT WRITE IN THIS AREA			
DO NOT WRITE IN THIS AREA				DO NOT WRITE IN THIS AREA					DO NOT WRITE IN THIS AREA			

REMARKS - Attach sheet if more space needed

Print Name _____ Signature _____
 Title _____ Phone w/AC _____ Date _____

I certify that I am authorized to make this report, that it was prepared by me or under my supervision and direction, and that the information stated herein is true, correct and complete to the best of my knowledge.

