

STATEWIDE RULE 32 EXCEPTION DATA SHEET

(05/2012) Revised

(FILING FEE REQUIRED)

*\$ 375.00 PER RRC LEASE NUMBER OR \$375.00 PER RRC GAS ID NUMBER. IF SEVERAL LEASES ARE SURFACE COMMINGLED AND FLARED AT THE BATTERY, FEE IS \$375.00 PER COMMINGLING PERMIT NUMBER.(STATEWIDE RULE 78 AMENDMENT EFFECTIVE MAY 1, 2012)

Operator Number: _____
Operator Name & Address: _____
24 hr Emergency # (____) _____
RRC DISTRICT _____
COUNTY _____

Well/Lease/Plant/System Name _____ Field _____

Identification by ID# (Indicate Type):
API# _____ Gas ID# _____ Lease ID# _____ Drilling Permit# _____ Commingle Permit# _____ Plant ID# _____
Number(s) _____

Type of gas to be flared/vented (mark box): _____ Casinghead Gas _____ Gas Well Gas

Is this well/lease/plant subject to Statewide Rule 36 (H2S Area)? _____ Yes _____ No

If yes*, Form H-9 Certificate # _____ H2S Concentration _____ ppm

*Proximity to populated areas-(Highways, Roads, Towns, House or Homes, Etc.) LOCATE ON MAP

Disposition of gas (mark box): _____ Flare _____ Flare Stack/ Height _____ Flare Pit _____ Vent

Time period requested (days,months): _____ Effective ___/___/___ Expiration ___/___/___

Volume to be flared/vented during time period requested:

MCF/D per well or MCF/D per lease or MCF/D per plant/system or MCF total for time period

Method of Measurement: _____

Purpose of Filing (circle): No Pipeline* System Upset Clean Up/Test Well Size Compressor Other

*If no, distance to nearest pipeline _____ mile(s) - attach map showing location of site and nearest pipeline(s).

Explanation: _____

Before an exception can be granted, the following information must be submitted with this data sheet:

- * Explanation as to why the operations cannot be shut-in and the gas must be vented or flared
* If gas is vented, explain why the gas cannot be safely and continuously burned and that the gas can be safely vented
* Explanation of how all legal uses for casinghead gas have been investigated and exhausted
* Distance to nearest pipeline and operating conditions (e.g.sweet or sour, line pressure etc.)

OPERATOR'S CERTIFICATION

I declare under penalties prescribed in Sec.91.143, Texas Natural Resources Code, that I am authorized to request this exception, that this data sheet and its attachments were prepared by me or under my supervision and direction, and that the data and facts stated therein are true, correct, and complete, to the best of my knowledge.

Typed or printed name of operators's representative _____ Title _____

Telephone: Area Code - Number _____ Date _____ Signature _____

Does the applicant request to receive all Commission correspondence concerning the administrative review of this application VIA EMAIL ONLY: If yes, indicate email address _____@_____

RRC USE ONLY

Administrative action: Approved _____ Denied _____

Permit Number _____ Effective Date _____ Expiration Date _____

ALL PRODUCTION SHOULD BE ACCURATELY MEASURED WITH DISPOSITION OF GAS REPORTED TO CODE 4 ON MONTHLY PR

Return to: RAILROAD COMMISSION OF TEXAS
TERRY EDWARDS
PO BOX 12967
AUSTIN TX 78711