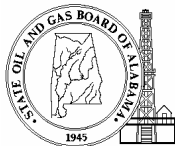


OGB -23

INSTRUCTIONS

Read Carefully and Comply Fully

Make sure that you have given correctly all information requested. **State Oil and Gas Board personnel will not make additions to or change any part of a notarized form.**



STATE OIL AND GAS BOARD OF ALABAMA

420 Hackberry Lane

P.O. Box 869999

Tuscaloosa, Alabama 35486-6999

(205) 349-2852 Fax (205)349-2861

www.ogb.state.al.us

Permit number
01- _____ - _____
API number

Unit Reserve Calculation

Initial Annual

(file in duplicate)

Name of operator _____

Address _____ City _____ State _____ Zip _____

Well name and number _____ County _____

(give footage from nearest section or tract lines) Section-Township-Range or Tract

Well

Location

Latitude . Longitude .

Field (If wildcat, so state) _____ Reservoir _____

Present allowable _____ Mcf/d

Original Reservoir Pressure (P_o) _____ psia Original Reservoir Temperature (T_o) _____ °F Gas Sp. Gr. _____

Gas Compressibility Factor at Original Pressure (P_o) and Temperature (T_o) = (Z_o) _____

Original Reservoir (P_o/Z_o) _____

Slope of Straight Line Material Balance (Absolute Value): m = _____

Well Initial (P_i/Z_i) _____

Initial Gas in Place (IGIP) = $\frac{P_i/Z_i}{m}$ = _____ Mcf

Original Gas in Place Adjustment Factor = $f = \frac{P_o/Z_o}{P_i/Z_i}$ = _____

Original Gas in Place (OGIP) = (IGIP) (f) = _____ Mcf

Allowable = OGIP (Billion cubic feet) x 600 Mcfd = _____ Mcf/d

Person to contact regarding this form	Phone number	
	Fax number	
	E-Mail address	

Remarks:

Executed this the _____ day of _____, 20 _____

Signature

Before me, the undersigned authority, on this day personally appeared _____ known to me to be the person whose name is subscribed to the above instrument, who being by me duly sworn on oath states that he/she is duly authorized to make the above report and that he/she has knowledge of the facts stated therein, and that said report is true and correct.

Subscribed and sworn to before me this _____ day of _____, 20 _____

SEAL
My commission expires _____

Notary Public in and for _____
County, _____

