OPERATOR'S REPORT OF AND AUTHORITY TO TRANSPORT WASTE CRUDE OIL OR CONDENSATE TO A PURCHASER

FOR THE MONTH OF: _____, 20_____.

(NOTE: VERBAL AUTHORITY TO TRANSPORT FLUID HEREIN REPORTED MUST BE OBTAINED FROM THE MSOGB FIELD INSPECTOR PRIOR TO MOVING FLUID FROM FACILITY)

Well Name & Number or Facility Name	Field		Type of Facility	
Sec-Twp-Rge	County		State	
Operator				
Street	City	State	Zip	Telephone
Name of operator's representative ordering waste fluid be transported from facility:				
Waste crude oil or condensate (including condensate from pipeline drip station) transported. (List sources and estimated volumes on back of form) Dates transported: ____/_____,_____,_____,_____,_____,_____,_____,_____,_____, Total Volume transported:_____ (Bbls.) ____,_____,_____,_____,_____,_____,_____/20_____.				
Name of transporter. (If transporter is same as operator, enter "Same as operator")				
Transporter's street address	City	State	Zip	
Field address (Leave blank if same as Transporter's street address)				
Name of company receiving waste crude oil or condensate (If same as transporter, so state and enter address of receiving facility if different from transporter's address.)				
Street	City	State	Zip	Telephone

The undersigned certifies that the rules and regulations of the Mississippi State Oil and Gas Board have been complied with and that the above transporter is authorized to transport the above specified volume of the waste crude oil or condensate from the above described well or facility, and that this authorization will be valid only for the volume shown above.

Executed this the _____ day of _____, 20

State of _____

County of _____ _____
Signature of Affiant

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 is duly authorized to make the above report and that he 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

_____
Signature of Notary Public

Notary Public in and for _____County,

_____
State

My commission expires : _____

Approved _____
(Date)

By _____
State Oil and Gas Board

MISSISSIPPI STATE OIL AND GAS BOARD
Operator's Report of Transporting Waste Oil or Condensate

Form 8W

Revised September, 2008

(REQUIREMENTS AND INSTRUCTIONS ON PAGE 2)

List below the sources of waste crude oil being transported and estimated volume (bbls) from each. List by Operator, Field and Well/Facility name. Attach additional page if necessary. (Not required if condensate from pipeline drip station or compressor station)

Field	Operator	API, Well or Facility Name	Barrels

NOTE: A COPY OF THIS FORM MAY BE MAILED TO EACH OPERATOR LISTED

(Attach additional sheets if necessary)

NOTICE

Waste crude oil or condensate is crude oil and/or condensate not covered by a permanent Form 8 on file with the Board for an oil or gas producing well.

A Form 8W must be filed each month showing the total volume and dates waste crude oil/condensate is transported to a purchaser, including, but not limited to the following:

1. The transporting to a purchaser of crude oil or condensate recovered from a crude oil reclaiming facility.

2. The transporting to a purchaser of crude oil or condensate (skim oil) recovered from tanks associated with a saltwater disposal well.

3. The transporting to a purchaser of condensate recovered from a pipeline drip station.

4. The transporting to a purchaser of crude oil or condensate from any well or facility that is not reported as production from an oil or gas well covered by a permanent Form 8

INSTRUCTIONS

Secure verbal authority from appropriate Field Inspector prior to transporting waste crude oil/condensate to purchaser.

Form 8W is required to be filed in triplicate.

The Form 8W is not a permanent Authorization to Transport. A new form must be submitted each month waste crude oil/condensate is transported from a facility.