



Form 1073IMW
Notice of transfer of multiple underground injection well operatorship
OAC 165:5-3-1(b)(1)(Q); OAC 165:10-1-7(b)(83)
PAYMENT REQUIRED

Instructions:

1. Required Payment: \$250.00
2. Current Operator must attach Form 1012 report for year of transfer. (Form 1012 must be current and up-to-date)
3. Attach the injection or disposal well's Form 1002A
4. List OCC order/permit number for injection/disposal
5. Attach MIT report (must be less than a year old) or (less than 30 days if commercial)
(If you filed 1002A or MIT online, you do not need to attach)

Number of wells Transferred: _____

Date of transfer: _____

CURRENT OPERATOR

Name		OCC/OTC NO
Address		
City	State	Zip
Phone No.	FAX No./E-mail	
I verify that I am the legal operator of record with authority to transfer operatorship of this well, that the facts presented herein are true and correct, and that I have completed this form as required by the above instructions. (Signatory must be listed on company's Form 1006B Operator's Agreement)		
Signature		
Name & Title (Printed)		
Signed and sworn to before me		
This _____ day of _____, _____.		
		Notary public
My commission expires: _____		

NEW OPERATOR

Name		OCC/OTC
Address		
City	State	Zip
Phone No.	FAX No./E-mail	
Being the new operator, as of the effective date of transfer, I accept the facts presented as being true and correct and accept the operational responsibility for the well on the described property. (Signatory must be listed on company's Form 1006B Operator's Agreement)		
Signature		
Name & Title (Printed)		
Signed and sworn to before me		
This _____ day of _____, _____.		
		Notary public
My commission expires: _____		

If no current operator, please sign below:

I verify under oath that I have exercised due diligence in attempting to locate the current operator of record according to OCC records, who has abandoned the listed well/lease and cannot be located to obtain signature. I have attached a certified copy of the recorded lease or assignment, or certified copies of a journal entry of judgment or bankruptcy proceeding pursuant to OAC 165:10-1-15(b).

Signature: _____

Signed and sworn to before me this _____ day of _____, _____.

Notary Public: _____ My commission expires: _____

OCC USE ONLY		
Department:	Received	Approved Date
Surety		
UIC		
Well Records		

