

For NDOM Use Only Entered in Database

By: _____ Date: _____

STATE OF NEVADA
 COMMISSION ON MINERAL RESOURCES
DIVISION OF MINERALS
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 Carson City, Nevada 89703
 (775) 684-7040 | Fax (775) 684-7052
<http://minerals.nv.gov>

COMMERCIAL AND INDUSTRIAL CLASS - GEOTHERMAL SUBSURFACE INJECTION MONTHLY REPORT

Company: _____

Address: _____

Plant/Project: _____

County: _____ Month of: _____ Year _____

Show each injection well separately. File not later than the last day of the month for the preceding month.

Ln #	NDOM Permit Number	Well No	Geothermal Fluids Injected		Average Temp	Injection Pressure	Reservoir depth	Formation
			Gallons per day	Gallons per month				
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								

This report to be filed by the end of the month following the month herein reported.*I hereby certify that the information given herewith is true, correct, and complete to the best of my knowledge.*

Signature _____

Print name _____

Telephone _____

Date _____