

If you have any questions, please contact James Thum at: jthum@idl.idaho.gov and/or 208-334-0243

## IDAHO OIL AND GAS CONSERVATION COMMISSION OIL AND GAS MONTHLY TRANSPORTATION AND STORAGE REPORT



Company	:		Report Period (Month/Year):						
Address	<u> </u>		_						
City	:		State:			Zip:			
Contact Name	:		Title:			Phone:			
						Email:			
Amended Report (Y/N)			Amended (Month/Year):						
	T			- ()		/			
Origin/Facility I.D.	Date Received	Destination/Facility I.D.	Date Disposed	Gas (MCF)	Oil (BBLS)	NGL's (GAL)	Condensate (BBLS)	Transported (Y/N)	Stored (Y/N)
					l				
CERTIFICATE: I, the undersigned, state that I am the: and that I am authorized by said company to make this report and that this report was									
prepared under my supervision and direction and that the facts stated herein are true, correct and complete to the best of my knowledge.									
	DATE:	=	-	SIGNATURE:					
	DATE.			SIGNATURE.					
*****IDL Office Use Only*****									
Reviewed By: Date:									
Nevieweu by.		Date.							
Instructions: Please complete the fields above as information is available for the month and provide to the IDL Oil and Gas Division per the reporting requirements outlined in Idaho Statutes Title 47-324(1)(d)									
	(d) Monthly transportation and storage report. Each gatherer, transporter, storer or handler of crude oil or hydrocarbon products, or both, shall file monthly reports showing the required information concerning the transportation operations of the gatherer, transporter, storer or handler before								
	the fifteenth day of the second calendar month following the month of operation. The provisions of this subsection shall not apply								
to the operator of any refinery, processing plant, blending plant or treating plant if the operator of the well has filed the required form.									
Definitions:	Origin/Facility I.D.	Title and location of facility or well where the product was obtained, I.E. gathering facility, processing facility or well							
	Date Received	Date when product was received							
	Destination/Facility I.D.	Title and location of facility that product was transferred to, I.E. refinery name and location							
	Date Disposed	Date when product was disposed/delivered							
	Gas/Oil/NGL's/Cond.	L's/Cond. Volume transported and/or stored							
	<u>Transported / Stored</u> Please indicate which method was used for described volume								
Remember to include the name, date and signature of person filing the report. Please email completed report to jthum@idl.idaho.gov.									

Monthly Transportation Storage Report Idaho Code 47-324(1)(d) IDLOGD0025.01 (08/2018)