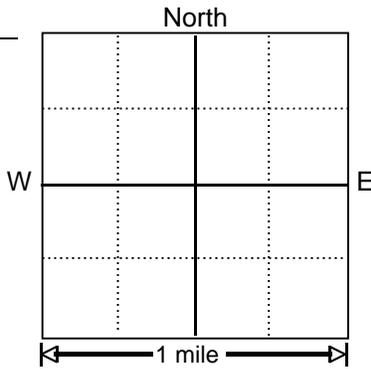


**SOUTH DAKOTA WELL AND TEST HOLE PLUGGING REPORT 11-02**

Location \_\_\_\_\_ ¼ \_\_\_\_\_ ¼ Sec \_\_\_\_\_ Twp \_\_\_\_\_ Rg \_\_\_\_\_

County \_\_\_\_\_

Please mark well location with an "X"



Plugging Completion Date \_\_\_\_\_

Well Owner:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Comments:

**CHECK APPROPRIATE BOX**

EXISTING WELL

TEST HOLE

Well depth \_\_\_\_\_

Casing material \_\_\_\_\_

Casing size(s) \_\_\_\_\_

Casing condition \_\_\_\_\_

Hole depth \_\_\_\_\_

Hole size \_\_\_\_\_

Describe plugging procedure:

Describe grout or plugging material:

Type of non-slip plug: \_\_\_\_\_

This well or test hole was plugged under license # \_\_\_\_\_ and this report is true and accurate.

Drilling firm: \_\_\_\_\_

Signature of Licensed Representative: \_\_\_\_\_

Signature of Well Owner: \_\_\_\_\_

Date: \_\_\_\_\_