



PLUGGING REPORT

Name and Address of Operator:	Telephone
Well Name and Number:	

Location of well: Footages (from Section Line), Qtr-Qtr, Sec, Twp, Rge, County:	Field and Pool, or Wildcat
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Date Plugged	Total Depth	Produced Oil or Gas; Injected; Dry Hole?	Amount well produced or injected at initial completion and when plugged (bbls oil & water/day, MCF gas & air/day)

CASING RECORD (Report all strings set in well)

Hole Size	Casing Size	Weight per Ft	Depth Set	Amount Pulled	Sacks and Type of Cement	Top of Cement
1)						
2)						
3)						
4)						

PLUGGING RECORD

Type of Plug (Cmt or Mech)	Interval/Depth	Formation Isolated	Sacks and Type of Cement Used (indicate if squeeze cemented) Use additional page(s) if needed.
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			

I hereby certify that the foregoing as to any work or operation performed is a true and correct report of such work or operation.

_____	_____	_____	_____
Signature	Name (Print)	Title	Date

State of _____)
 County of _____)

On this _____ day of _____, 20____, before me personally appeared _____ and acknowledged that he is the current operator and that he is authorized to execute this report. SEAL

Notary Public _____ My Commission Expires _____

FOR OFFICE USE ONLY

Approved By: _____	Title: _____	Date: _____
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