

WELL PLUGGING INSPECTION & RELEASE FORM

PLUGGING COMMENCED _____ OPERATOR: _____
 PLUGGING COMPLETED _____ FARM: _____
 VERBAL PERMISSION ON _____ WELL NO: _____

- | | | | | |
|----|--|--------------------------|--------------------------|--------------------------|
| | | YES | NO | N/A |
| 1. | IS COAL BEING MINED IN THE AREA? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. | WERE CEMENT AND GEL MIXED AND USED IN ACCORDANCE WITH ACCEPTED INDUSTRY STANDARDS? | | | |
| | A. BOTTOM HOLE PLUGGED | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | B. 100' PLUGS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | C. LATEX PLUGS USED FOR H ₂ S GAS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | D. PROPER PLUGS THROUGH COAL SEAMS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | E. PROPER PLUGS SET TO PROTECT FRESHWATER | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | F. PROPER AMOUNT OF GEL USED TO DISPLACE PLUGS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

TYPE	FROM	TO	PIPE REMOVED
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- | | | |
|---|--------------------------|--------------------------|
| | YES | NO |
| 3. WERE ALL CHANGES APPROVED BY INSPECTOR? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. WAS THE EQUIPMENT USED FOR PULLING CASING PROPERLY SIZED AND RIGGED TO PULL 150% OF THE HEAVIEST STRING OF PIPE EXPECTED TO BE PULLED? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. DID THE OPERATOR GIVE THE INSPECTOR PROPER NOTICE? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. WERE ACCURATE PLUGGING RECORDS KEPT BY THE OPERATOR? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. WAS A PROPER MONUMENT SET WITH API NUMBER ATTACHED? | <input type="checkbox"/> | <input type="checkbox"/> |

API NO: 47-_____

8. DID WELL SITE AND ACCESS ROAD MEET THE FOLLOWING RECLAMATION REQUIREMENTS?

	YES	NO		YES	NO
A. RECLAIMED	<input type="checkbox"/>	<input type="checkbox"/>	B. FENCES REPLACED	<input type="checkbox"/>	<input type="checkbox"/>
C. MULCHED	<input type="checkbox"/>	<input type="checkbox"/>	D. PROPER DRAINAGE	<input type="checkbox"/>	<input type="checkbox"/>
E. SEEDED	<input type="checkbox"/>	<input type="checkbox"/>	F. ALL EQUIPMENT REMOVED	<input type="checkbox"/>	<input type="checkbox"/>
G. PIT BACKFILLED	<input type="checkbox"/>	<input type="checkbox"/>			

DATE RELEASED

INSPECTOR'S SIGNATURE

RECORD ALL VISITS TO THIS WELL ON PAGE 3

