

WELL ABANDONMENT

CONTRACTOR/AGENT _____ REGISTRATION _____

DATE _____ TYPE OF SITE OR PROGRAM _____

1. WELL LOCATION (show sketch of location on back of this form)

Municipality _____ County _____

Quadrangle _____

(Road, Community, subdivision, lot no.)

Latitude _____ Longitude _____

2. OWNER AND ADDRESS _____

3. TOPOGRAPHY: (Circle) hilltop, slope, stream, terrace, valley, stream channel, draw, local

4. USE OF WELL: _____

WELL DIAGRAM: sketch a diagram showing depths of a well, casing (if present), grouting materials perforations, etc.

5. DEPTH OF WELL: _____ DIAMETER OF WELL _____

6. AMOUNT OF CASING REMOVED _____ DIAMETER _____

		neat cement	sand cement
7. SEALING MATERIAL:	bags		
	(94 lb):	_____	_____
	Gals. of	_____	_____
	Water:	_____	_____
	Yds of	_____	_____
	Sand:	X	_____

OTHER MATERIAL: _____ AMOUNT: _____

8. EXPLAIN METHOD OF EMPLACEMENT OF MATERIAL

9. CERTIFICATION: We hereby certify that this well abandonment record is true and exact, and was accomplished on _____ day of the month of _____, _____ with our active participation and that we are qualified to participate in such abandonment actions.

1. Signature of participant: _____ 2. Signature of participant _____

Date: _____ Address: _____ Date: _____ Address: _____
