



NOTICE OF INTENTION TO PLUG AND ABANDON

PRINT OR TYPE IN BLACK INK

THIS NOTICE IS A LEGAL DOCUMENT. READ THE APPLICABLE AFFIRMATION AND ACKNOWLEDGMENT CAREFULLY BEFORE SIGNING.

For Instructions on completing this form, visit the Division's website at www.dec.state.ny.us/website/dmr or contact your local Regional office.

WELL OWNER (Full Name of Organization or Individual as registered with the Division)	API WELL IDENTIFICATION NUMBER 31- - -
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ADDRESS (P.O. Box or Street Address, City, State, Zip Code)

WELL NAME AND NUMBER	COUNTY	TOWN
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7½ MINUTE QUAD NAME	QUAD SECTION	TOTAL DEPTH TMD	PLUG BACK DEPTH TMD
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LOCATION DESCRIPTION	Decimal Latitude (NAD83)	Decimal Longitude (NAD83)
Surface <u> 0' </u> <u> 0' </u>	_ _ . _ . _ . _ . _ . _ . _ .	_ _ . _ . _ . _ . _ . _ . _ .
Top of Target Interval _____	_ _ . _ . _ . _ . _ . _ . _ .	_ _ . _ . _ . _ . _ . _ . _ .
Bottom of Target Interval _____	_ _ . _ . _ . _ . _ . _ . _ .	_ _ . _ . _ . _ . _ . _ . _ .
Bottom Hole _____	_ _ . _ . _ . _ . _ . _ . _ .	_ _ . _ . _ . _ . _ . _ . _ .
TVD TMD		

For vertical wells, use **TMD** to record depths

PLANNED DATE AND TIME OF COMMENCEMENT OF OPERATIONS

NAME OF PLANNED PLUGGING CONTRACTOR (as registered with the Department)	TELEPHONE NUMBER (include area code)
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	CASING STRINGS	HOLE SIZE (in.)	PIPE SIZE (in.)	WEIGHT (lbs./ft.)	NEW OR USED	PUT IN WELL (TMD)	PULLED OUT (TMD)	LEFT IN WELL (TMD)	METHOD (cut, shot, etc.)
C A S I N G R E C O R D	Drive Pipe or Conductor								
	Surface or Water								
	Intermediate								
	Production								
	Liners								

Enter proposed plugging plan starting from total depth

	FILLING MATERIALS BRIDGES AND PLUGS	CLASS/TYPE OF CEMENT OR OTHER MATERIAL	NUMBER OF SACKS	SLURRY WT. (ppg)	YIELD (ft. ³ /sx.)	VOLUME (ft. ³)	TAGGED (Yes/No)	FROM (TVD/TMD)	TO (TVD/TMD)
P R O P O S E D P L U G G I N G P L A N									

DEPARTMENT USE ONLY	
BOND NUMBER	
PLUGGING PERMIT NUMBER	
DATE ISSUED	

WELL NAME AND NUMBER	API WELL IDENTIFICATION NUMBER 31- - -
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GIVE DETAILS FOR EACH OF THE PROPOSED CEMENT PLUGS INCLUDING BUT NOT LIMITED TO: how the cement will be mixed (by hand, mechanical mixer, service company, etc.), how the plug will be placed in the well (through pipe on gel, through pipe on a bridge, bullhead, squeeze, etc.) size of the tubing, casing or drill pipe used to place the plug in the well, and how the cement will be put into the well (pumped or gravity feed).

FOR DIRECTIONAL OR SIDETRACK WELLS also include a well bore diagram showing the location of each of the plugs noted in the above referenced details. FOR WELLS NOT CURRENTLY REGISTERED WITH THE DEPARTMENT list the well type and also submit a map showing the location of the well.

AFFIRMATION AND ACKNOWLEDGMENT

A. For use by individual:

I affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. I am aware that false statements made in this form are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

_____ Printed or Typed Name of Individual

_____ Signature of Individual

_____ Date

B. For use by organizations other than an individual:

I affirm under penalty of perjury that I am _____ (title) of _____ (organization); that I am authorized by the organization to complete this form; that this form was prepared under my supervision and direction; and that the information provided in this form is true to the best of my knowledge and belief. I am aware that false statements made on this form are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

_____ Printed or Typed Name of Authorized Representative

_____ Signature of Authorized Representative

_____ Date