

PRINT OR TYPE IN BLACK INK



# PLUGGING REPORT

For instructions on completing this form, visit the Division's website at [www.dec.state.ny.us/website/dmn](http://www.dec.state.ny.us/website/dmn) or contact your local Regional office.

FOR DEPARTMENT USE ONLY									
Reviewed by _____			Date _____			Bond No. _____			
WELL NAME AND NUMBER					API WELL IDENTIFICATION NUMBER				
31-         -         -									
WELL OWNER (Full Name of Organization or Individual as registered with the Division)						COUNTY		TOWN	
7½ MINUTE QUAD NAME			QUAD SECTION		PLUGGING PERMIT NO.		TOTAL DEPTH <b>TMD</b>		
LOCATION DESCRIPTION			Decimal Latitude (NAD83)			Decimal Longitude (NAD83)			
Surface _____ 0' _____ 0'			_____ . _____			_____ . _____			
Top of Target Interval _____			_____ . _____			_____ . _____			
Bottom of Target Interval _____			_____ . _____			_____ . _____			
Bottom Hole _____			_____ . _____			_____ . _____			
<b>TVD</b> _____			<b>TMD</b> _____						
For vertical wells, use <b>TMD</b> to record depths									
TYPE OF PLUGGING OPERATION									
Plug & Skid			Plug Back			Plug & Abandon			
PLUGGING PERFORMED BY						DATE OF PLUGGING			
DIVISION OF MINERAL RESOURCES WITNESS						DATE WITNESSED			
CASING RECORD	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.)
	Drive Pipe or Conductor								
	Surface or Water								
	Intermediate								
	Production								
	Liners								
Enter plugging data starting from total depth									
PLUGGING DATA	FILLING MATERIALS BRIDGES AND PLUGS	CLASS/TYPE OF CEMENT OR OTHER MATERIAL	NUMBER OF SACKS	SLURRY WT.(ppg.)	YIELD (ft. <sup>3</sup> /sx.)	VOLUME (ft. <sup>3</sup> )	TAGGED (Yes/No)	FROM (TVD/TMD)	TO (TVD/TMD)
Attach additional information as necessary									
Have pits and other excavations been filled? Yes No			Has casing been cut off below plow depth? Yes No			Have the following been removed? Debris Equipment Yes No			
Have the following been removed? Debris Equipment Yes No						Has the well-site been restored to condition similar to adjacent terrain? Yes No			
If any of these questions are answered <b>NO</b> , provide an explanation and schedule for completing the reclamation in the Comments section below.									
COMMENTS:									
Affirmation and Acknowledgment									
<b>A. For use by individual:</b>									
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>B. For use by organizations other than an individual:</b>									
I hereby affirm under penalty of perjury that I am _____ (title)									
of _____ (organization); that I am authorized by the organization to make this report, that this report was prepared under my supervision and direction; and that the information provided in this report is true to the best of my knowledge and belief. I am aware that false statements made in this report 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			