

OGB - 11
INSTRUCTIONS

Read Carefully and Comply Fully

This report must be filed in triplicate with the State Oil and Gas Board within thirty (30) days after completion of plugging.

Under Details of plugging, give detailed account of the manner in which work was performed including the following: nature and quantities of materials used in plugging and the depths and lengths of the various plugs; amount, size, and depth of any mechanical plugs left in the well; records of any tests or measurements made; amount, size and depth of all casing left in the well; amount and size of casing removed; volume and gravity of mud-laden fluid used, and pressures retained in mudding; and a complete record of any perforating and/or shooting done; etc.

State Oil and Gas Board personnel will not make additions to or change any part of a notarized form.

STATE OIL AND GAS BOARD OF ALABAMA

Form OGB - 11

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420 Hackberry Lane

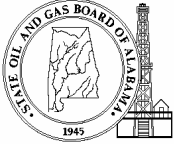
P.O. Box 869999

Tuscaloosa, Alabama 35486-6999

(205) 349-2852 Fax (205)349-2861

www.ogb.state.al.us

Permit number



Report of Well Plugging

Temporary Permanent

(file in triplicate)

Name of operator _____

Address _____ City _____ State _____ Zip _____

Well name and number _____ County _____

(give footage from nearest section or tract lines)

Section-Township-Range or Tract _____

Well Location

Latitude .

Longitude .

Field (if wildcat, so state) _____ Producing or injection horizon _____

Type well (oil, gas, class II, dry hole, etc.) _____ Perforations _____

Person to contact regarding this form

Phone number

Fax number

E-Mail address

RESULTS OF PLUGGING

Permission to plug and procedure authorized by _____ Date _____

(Oil & Gas Board Agent)

Date plugging operations began _____ Drilling contractor _____

Date temporary plugging operations completed _____ Workover contractor _____

Date permanent plugging operations completed* _____ Cementing contractor _____

* Date steel plate affixed on casing stub.

Give full details of plugging accompanied by a wellbore schematic

Operation witnessed by Agent of the Board Yes No If yes, give name of Agent _____

Executed this the _____ day of _____, 20 _____

Signature

Before me, the undersigned authority, on this day personally appeared _____ known to me to be the person whose name is subscribed to the above instrument, who being by me duly sworn on oath states that he/she is duly authorized to make the above report and that he/she has knowledge of the facts stated therein, and that said report is true and correct.

Subscribed and sworn to before me this _____ day of _____, 20 _____

SEAL

My commission expires _____

Notary Public in and for _____

County, _____