APPLICATION TO PLUG AND ABANDON

| FIELD | | | | |
|---|------------------------------|-----------------|---|---------|
| OPERATOR | | ADDRESS & PHONE | | |
| LEASE NUMBER (Lessor's name if fee) | | | WELL NO | |
| LOCATION | | | | |
| TYPE OF WELL | | | TOTAL DEPTH | |
| | (Oil, Gas, or Dry) | | | |
| ALLOWABLE (If Assigned) | | | | |
| LAST PRODUCTION TEST OIL | <u>-</u> | _ (Bbls.) | WATER | (Bbls.) |
| GAS | S | _ (MCF) | DATE OF TEST | |
| PRODUCING HORIZON | PR0 | ODUCING FROM _ | TO | |
| 1. COMPLETE CASING RECORD: | | | | |
| 2. FULL DETAILS OF PROPOSED PLAN (| OF WORK: | | | |
| DATE COMMENCING OPERATIONS | | | | |
| NAME OF PERSON DOING WORK | | ADDRE | SS | |
| Mail one copy of completed form to: Oil and Gas Program Administrator Arizona Department of Environmental Quality 1110 W. Washington Street Phoenix, AZ 85007 email one copy to: ogcc@azdeq.gov | Signature Title Address Date | | | |
| D. Assessed | | | STATE OF ARIZONA | |
| Date Approved STATE OF ARIZO OIL & GAS CONSERVATION (| | | AS CONSERVATION COMM Application to Plug and Abandon wo copies: one by mail, one electror | |

Permit No.

12/2016