PLUGGING RECORD												
Operator							Address & Phone number					
Federal, State, or Indian Lease No. or lessor's name if fee lease						II No. Field & Reservoir						
Location of Well						Sec - Twp - Rge County						
Application to drill this well was filed in name of				Has this well ever produced oil or gas?			Character of well at completion (initial Oil (bbls/day) Gas (N			production) CF/day)	Dry?	
Date plugged				Total depth			Amount well producing when plugge Oil (bbls/day) Gas (: ICF/day)	Water (bbls/day)	
Name of each formation containing oil or gas. Indicate which formation open to wellbore at time of plugging			ent of each formation			Depth interval of each formation			mation	Size, kind & depth of plugs used. Indicate zones squeeze cemented, giving amount of cement		
				04000			20					
CASING RECORD Size pipe Put in well (ft.) Pulled out (ft.) Left in well (ft.) Give depth and Packers and shoes												
Size pipe	Put in well (ft.)	well (it.) Fulled Out		(ii.) Leit iii weii (method	d of parting (shot, etc.)		Packers and shoes			
Was well fille	egulations?		Indicate deepest formation containing fresh water									
	NAME AND ADDI	RESSES O	F ADJA	CENT LEA	ASE (<u>l</u> OPERA	TORS OR	OWNE	ERS OF TH	IE SURFACE		
Name Add						Direction				n from this well		
In addition to other information required on this form, if this well was plugged back for use as a fresh water well, give all pertinent details of plugging operations to base of fresh water sand, perforated interval to fresh water sand, name and address of surface owner, and attach letter from surface owner authorizing completion of this well as a water well and agreeing to assume full liability for any subsequent plugging which might be required.												
Use reverse side for additional detail												
CERTIFICATE: I,	the undersigned, ur	nder the pena	alty of pe								of the	
report was prepar	ed under my superv	vision and dire	ection an	` .	,			•		•	report; and that this tof my knowledge.	
Date Signature												
Mail one copy of completed form to: STATE OF ARIZONA												
Oil and Gas Program Administrator Arizona Department of Environmental Quality						OIL & GAS CONSERVATION COMMISSION						
11201a Department of Environmental Quality 1110 W. Washington Street Phoenix, AZ 85007							Plugging Record					
Permit No	cc@azde	eq.gov		File two copies: one by mail, one electronically Form No. 10								