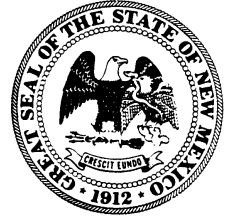




PLUGGING RECORD



NOTE: A Well Plugging Plan of Operations shall be approved by the State Engineer prior to plugging - 19.27.4 NMAC

I. GENERAL / WELL OWNERSHIP:

State Engineer Well Number: _____

Well owner: _____ Phone No.: _____

Mailing address: _____

City: _____ State: _____ Zip code: _____

II. WELL PLUGGING INFORMATION:

1) Name of well drilling company that plugged well: _____

2) New Mexico Well Driller License No.: _____ Expiration Date: _____

3) Well plugging activities were supervised by the following well driller(s)/rig supervisor(s): _____

4) Date well plugging began: _____ Date well plugging concluded: _____

5) GPS Well Location: Latitude: _____ deg, _____ min, _____ sec
Longitude: _____ deg, _____ min, _____ sec, WGS 84

6) Depth of well confirmed at initiation of plugging as: _____ ft below ground level (bgl),
by the following manner: _____


7) Static water level measured at initiation of plugging: _____ ft bgl

8) Date well plugging plan of operations was approved by the State Engineer: _____

9) Were all plugging activities consistent with an approved plugging plan? _____ If not, please describe differences between the approved plugging plan and the well as it was plugged (attach additional pages as needed):

- 10) Log of Plugging Activities - Label vertical scale with depths, and indicate separate plugging intervals with horizontal lines as necessary to illustrate material or methodology changes. Attach additional pages if necessary.

For each interval plugged, describe within the following columns:

<u>Depth</u> (ft bgl)	<u>Plugging Material Used</u> (include any additives used)	<u>Volume of Material Placed</u> (gallons)	<u>Theoretical Volume of Borehole/ Casing</u> (gallons)	<u>Placement Method</u> (tremie pipe, other)	<u>Comments</u> ("casing perforated first", "open annular space also plugged", etc.)
					

MULTIPLY		BY		AND OBTAIN
cubic feet	x	7.4805	=	gallons
cubic yards	x	201.97	=	gallons

III. SIGNATURE:

I, _____, say that I am familiar with the rules of the Office of the State Engineer pertaining to the plugging of wells and that each and all of the statements in this Plugging Record and attachments are true to the best of my knowledge and belief.

Signature of Well Driller

Date