

PLUGGING RECORD - OIL or GAS WELL
OREGON DEPARTMENT of GEOLOGY and MINERAL INDUSTRIES • 229 BROADALBIN ST SW • ALBANY OR 97321

In compliance with Oregon Revised Statutes (ORS) 520 and Oregon Administrative Rules (OAR) 632-010

(1) Permittee Information

Name	
Mailing Address	
City/State/Zip	
Telephone	
Fax	
Email	
Prepared by	

(2) Well Information

Well No.	
DOGAMI ID No.	
Date Well Plugged	

By signing this form, I, being first duly sworn, depose and say that I have knowledge of the facts stated herein, that they are true and correct, and that I am authorized to make this report.

Signature

Title

Date

(3) Plugging Information

Was the well filled with mud-laden fluid as required?	
How was the mud applied?	

Type of Cement	Cement Additives		Location of Plugs (Intervals)		Capacity of Plugging Interval		Volume of Cement		Excess Volume of Cement	
	Type	% by weight		ft.		bbls/ft.		bbls		bbls
		% by weight		ft.		bbls/ft.		bbls		bbls
		% by weight		ft.		bbls/ft.		bbls		bbls
		% by weight		ft.		bbls/ft.		bbls		bbls
		% by weight		ft.		bbls/ft.		bbls		bbls

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

Signature

My commission expires _____

Notary Public for State of _____