

MARYLAND DEPARTMENT OF THE ENVIRONMENT

Land and Materials Administration • Mining Program
1800 Washington Boulevard • Suite 655 Baltimore Maryland 21230
410-537-3557 • 800-633-6101 x3557 • www.mde.maryland.gov

AFFIDAVIT OF PLUGGING AND FILLING WELL

AFFIDAVIT SHOULD BE IN TRIPPLICATE, one copy mailed to the Department, one copy to be retained by the Well Operator, and the third copy (and extra copies if required) should be mailed to each gas operator at their respective addresses.

Farm name: _____ Operator Well No.: _____

LOCATION: Elevation: _____ Quadrangle: _____

District: _____ County: _____

Latitude: _____ Feet South of _____ Deg. _____ Min. _____ Sec. _____

Longitude: _____ Feet West of _____ Deg. _____ Min. _____ Sec. _____

Well Type: OIL GAS

Company: _____ Operator or _____
Owner:

Agent: _____ Operator or _____
Owner: _____

Permit Issued Date: _____

AFFIDAVIT

STATE OF MARYLAND,

County of _____ ss:

____ and _____ being first
duly sworn according to law depose and say that they are experienced in the work of plugging
and filling oil and gas wells and were employed by the above named well operator, and
participated in the work of plugging and filling the above well say that said work was
commenced on the ____ day of _____, 20____, and the well was plugged and filled in
the following manner:

TYPE	FROM	TO	PIPE REMOVED	LEFT

Description of monument: _____ and that work of plugging and filling said well was completed on the _____ day of _____, 20_____.

Any further deponents saith not. _____

Sworn and subscribe before me this _____ day of _____, 20_____.

My commission expires: _____
Notary Public

Affidavit reviewed by Minerals, Oil, and Gas Division: _____

Title: _____

PLUGGING REPORT ON NEXT PAGE

Plugging Report for MSHA

Surface

Well Number: _____ Mine: _____

Permit Number: _____

Date Clean Out Started: _____

Date Well Bore Plugged: _____

Plugs:

<u>From</u>	<u>To</u>	Type of Cement
_____	_____	Expandable Cement
_____	_____	Expandable Cement
_____	_____	Thixotropic Cement w/ Green Dye
_____	_____	Expandable Cement

Casing Remaining in Well Bore

	Top	Bottom	Left	Pulled
Sucker Rods				
2 3/8" Tubing				
5 1/2" Casing				
7" Casing				
8 5/8" Casing				
10 3/4" Casing				
16" Casing				
Other 13"				

Cement

Expansive _____ Sacks

Thixotropic _____ Sacks

Econofill _____ Sacks

Mud Flush _____ Sacks

Other Type 1 _____

Est. Top Thix _____ Ft.

Did Cement Circ. _____

Cements**Caving: Moderate Normal Extreme****Lost Circulation: Extreme Moderate Normal****Difficulty Removing Casing: Extreme Moderate Normal****Debris in Well Bore: Wood Steel Other: _____**

Total Depth: _____