

United States Environmental Protection Agency



WELL REWORK RECORD, PLUGGING AND ABANDONMENT PLAN, OR PLUGGING AND ABANDONMENT AFFIDAVIT

Permittee Name and Address, Phone Number and/or Email

| | | |
|-------------------------|------------|----------------|
| Permit or EPA ID Number | API Number | Full Well Name |
|-------------------------|------------|----------------|

| | |
|-------|--------|
| State | County |
|-------|--------|

Locate well in two directions from nearest lines of quarter section and drilling unit

| | | | | | | | | | | | | | | | | | | | |
|--|----------|--------------------------|----------|----------|-----------|-----------|----------------|--|-------------------------|--|--|--|----------------|--|--------------------------|--|--|--|--|
| Surface Location | Latitude | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%;"> <tr> <td style="width: 15%;">1/4 of</td> <td style="width: 15%;">1/4 of</td> <td style="width: 15%;">Section</td> <td style="width: 15%;">Township</td> <td style="width: 15%;">Range</td> <td style="width: 20%;">Longitude</td> </tr> <tr> <td>ft. from (N/S)</td> <td></td> <td>Line of quarter section</td> <td></td> <td></td> <td></td> </tr> <tr> <td>ft. from (E/W)</td> <td></td> <td>Line of quarter section.</td> <td></td> <td></td> <td></td> </tr> </table> | 1/4 of | 1/4 of | Section | Township | Range | Longitude | ft. from (N/S) | | Line of quarter section | | | | ft. from (E/W) | | Line of quarter section. | | | | |
| 1/4 of | 1/4 of | Section | Township | Range | Longitude | | | | | | | | | | | | | | |
| ft. from (N/S) | | Line of quarter section | | | | | | | | | | | | | | | | | |
| ft. from (E/W) | | Line of quarter section. | | | | | | | | | | | | | | | | | |

| Well Class | Timing of Action (pick one) | Type of Action (pick one) |
|------------|-----------------------------|------------------------------------|
| Class I | Notice Prior to Work | Well Rework |
| Class II | Date Expected to Commence | Plugging and Abandonment |
| Class III | Report After Work | Conversion to a Non-Injection Well |
| Class V | Date Work Ended | |

Provide a narrative description of the work planned to be performed, or that was performed. Alternatively, attach a report that meets the requirements. Use additional pages as necessary. Please see the instructions for the specific information that must be provided.

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR § 144.32)

| | | |
|---|-----------|-------------|
| Authorized Signatory and Official Title <i>(Please type or print)</i> | Signature | Date Signed |
|---|-----------|-------------|

INSTRUCTIONS FOR FORM 7520-19

This form replaces forms 7520-12 and 7520-14. Use this form only when work is planned or has occurred that affects the well's construction or operation as an injection well, including work on the casing, tubing or packer (or for shallow Class V wells, the subsurface fluid emplacement network). Use one form per injection well. Note: operators closing Class V wells should use Form 7520-17.

PERMITTEE NAME, ADDRESS, PHONE AND/OR EMAIL: Enter the name and street address, city/town, state, and ZIP code of the permittee. Also provide an email address (if available) and/or a phone number.

PERMIT OR EPA ID NUMBER: Enter the well identification number or permit number assigned to the well by the EPA or the permitting authority.

API NUMBER: Enter the number assigned by the local jurisdiction (usually a State Oil and Gas Agency) using the American Petroleum Institute standard numbering system.

FULL WELL NAME: Enter the full name of the well or project.

Enter the **STATE** and **COUNTY** where the well is located. For States that do not have counties, use the name of that State's equivalent jurisdiction at a more local level.

WELL LOCATION: Fill in the complete township, range, and section to the nearest quarter-quarter section. A township is north or south of the baseline, and a range is east or west of the principal meridian (e.g., T12N, R34W). Also include the distance, in feet, from the nearest north or south line and nearest east or west line of the quarter-section. Also, enter the **latitude** and **longitude** of the well in decimal degrees, to five or six places if possible; be sure to include a negative sign for the longitude of a well in the Western Hemisphere and a negative sign for the latitude of a well in the Southern Hemisphere.

Enter the **WELL CLASS**, i.e., the class of injection well as defined in 40 CFR 144.6.

TIMING OF THE ACTION: Check **Notice prior to work** if the activity has not yet occurred (i.e., is planned). Check **Report after work** if the activity described has already occurred. As appropriate, include the date the activity is expected to start or the date the activity was completed. (Note this may not be available, e.g., for a plugging plan submitted with a permit application.)

TYPE OF ACTION: Check the appropriate box to describe the kind of activity being reported. Check **Well Rework** for work that was/will be performed on the well after it has already been in operation as an injection well. Check **Plugging and Abandonment** to report on plans for or descriptions of final closure/plugging after use as an injection well. Check **Conversion to a Non-Injection Well** if the well is to be converted to something other than an injection well.

Provide a **NARRATIVE DESCRIPTION** of the work planned to be performed, or that was performed. The narrative should include a description of the main procedures planned or that occurred during the work activity. A service company report, daily report, or similar document may be attached if it includes all the requested information and is clear and legible.

For well reworks, include the following information: The reason for the well rework; depths of activity; type of activity; changes to injection well configuration, well casing, or cement behind casing; any plug added to the well and its depth; any newly drilled interval and its depth; method(s) to demonstrate that the well has mechanical integrity (as applicable); and any deviations from the approved rework plan (as applicable).

For a well plugging plan, include the following information: Reason for the well plugging; number of plugs placed, and their depths; materials used as plugs (e.g., cast iron bridge plug, cement, cement retainer); method to set plugs; and wait-on-cement times, if any. Also provide one or more cost estimates from an independent firm in the business of plugging and abandoning wells to plug the well as described in the plan.

For well plugging affidavit, include the following information: Reason for the well plugging; the method of plug emplacement; a tabular description of casing and tubing after plugging (i.e., size, weight, depth to be put in the well/left in the well, and hole size); a tabular description of plugs placed (i.e., depth of each plug, hole size, amount of cement, slurry weight and volume, calculated and measured top of the plug, materials used as plugs (e.g., cast iron bridge plug, cement, cement retainer)); a tabular description of all open hole and/or perforated intervals and intervals where casing will be varied (if any); wait-on-cement times, if any; and any deviations from the approved plugging plan (if applicable).

For conversion to a non-injection well, include the following information: Depths of activity; type of activity; changes to injection well configuration, well casing, or cement behind casing; any plug added to the well and its depth; any newly drilled interval and its depth; depths of new perforations; and method(s) to demonstrate that the well has mechanical integrity (as applicable).

For all of the above activities, also include the following: a well sketch depicting the work, results of well tests/logging performed, service company tickets, and any other available information demonstrating how the work was/is to be performed. Also, specify whether depths are below ground surface, relative to Kelly bushing, etc.

CERTIFICATION: This form must be signed and dated by either: a responsible corporate officer for a corporation, by a general partner for a partnership, by the proprietor of a sole proprietorship, or by a principal executive or ranking elected official for a public agency. While reports or other information developed by contractors or service companies may be attached, this form must be signed by a responsible entity as described at 40 CFR 144.32.

PAPERWORK REDUCTION ACT NOTICE: The public reporting and recordkeeping burden for this collection of information is estimated to average between 6.0 and 7.9 hours per response, depending on the injection well class. Burden means the total time, effort, or financial resource expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal Agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to the collection of information; search data sources; complete and review the collection of information; and, transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including the use of automated collection techniques to Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822), 1200 Pennsylvania Ave., NW., Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed forms to this address.