Form 1003/1003C Rev. 2018

OKLAHOMA CORPORATION COMMISSION

TO SEND THIS FORM TO THE OCC, PLEASE USE THE APPROPRIATE DISTRICT OFFICE

TYPE OR USE BLACK INK

ADDRESS (ON THE BACK OF THIS FORM) PLUGGING RECORD QAC 165:10-11-7 (PLEASE SEE INSTRUCTIONS ON BACK PAGE) Well Name/No. Location 1/4 1/4 1/4 1/4 1/4 1/4 Sec Total Depth Rase of Depth Treatable Water Classification OPERATOR Address City State Zip Code Ramil Addr. City State Zip Code Ramil Addr. Conductor Size Run (ft) Pulled (ft) Conductor Surface Set 2- From To Set 2- From To Set 3- From To Set 3- From To								
OAC 165:10-11-7								
Well Name/No. Location								
Location								
1/4								
Total Depth Treatable Water Classification OPERATOR Name Address City State Zip Code Run (ft) Pulled (ft) Conductor Surface Set 1 - From To Set 2 - From To Set 3 - From To Set 3 - From To								
Depth Treatable Water Classification DPERATOR Name OTC/OCC No. Address Phone City State Zip Code Email Addr. Conductor Conductor Set 1 - From To Set 1 - From To Set 2 - From To Set 3 - From To								
Name								
Name								
State Zip								
State Zip								
Code Addr.								
Conductor Surface Set 1 - From To								
I.C. Set 2- From To								
I.C. Set 2- From To								
P.C Set 3- From To								
Lnr.								
00.0 1.0								
Plug Type of Plug Hole Size or Depth No. Sacks Slurry Calculated Measured Top of	Plug							
Pipe Size Cement Volume TOC If Tagged								
3								
4								
5								
REMARKS								
Reason for Plugging								
CEMENTER CERTIFICATION								
I certify that the cement plugs were placed in this well as shown on this report, per OCC instructions. The cementing was performed by me or unc	er my							
direct supervision. I certify that all cementing data is true, correct and complete. Signature Date Name and Title Typed or Printed								
Company Name Permit No.								
Address Phone								
City State Zip								
OPERATOR CERTIFICATION								
I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information pherein, and that data and facts presented are ture, correct, and complete to the best of my knowledge. This covers all well data and information presented here	esented n.							
Signature Date Name and Title Typed or Printed								
CORPORATION COMMISSION USE ONLY								
By signing this form, the District Manager has approved the contents thereof as to form only. Said District Manager does not warrant the facts protein a content the operator are true or that the operator has properly plugged the described well.								

Signature of District Manager Field Inspector INSTRUCTIONS: Form 1003/1003C

- 1. Form must be completed in its entirety and mailed to the appropriate District Office (see below) within 30 days after plugging is completed.
- 2. Send original only.
- 3. Type or use BLACK ink only. This form is for record and must be legible.
- 4. API No. must be on form. To get an API No. use the OCC online Data Mining application or call the OCC Well Records Department at (405) 521-2275.
- 6. Cement plugs shall be placed in the well bore as required by the Rules of the Commission plus any additional plugs as may be specified by the District Manager or his representative, where unusual local conditions exist. (OAC 165:10-11-6)
- 7. The minimum amount of cement normally used in each plug in the open hole shall be a slurry volume equal to the amount necessary to fill the calculated volume of 100 feet of the hole in which the plug is placed.
- 8. A minimum 30 foot cement plug is required to be placed in the top of the well. (OAC 165:10-11-6)

	DISTRICT I (Bris	tow) District	Office 115 W	est 6th Street	Bristow, Ok	(74010 (918) 3	<u>867-3396</u>	
Counties Served:								
Adair	Cherokee	Craig	Creek	Delaware	Kay	Lincoln	Mayes	
Muskogee	Noble	Nowata	Ottawa	Pawnee	Payne	Rogers	Tulsa	
Wagoner	Washington			<u>(E</u>	-mail: OGBris	towOffice@occe	mail.com)	

	DISTRICT II (Kin	gfisher) District	Office 101 So	uth 6th Street	Kingfisher,	OK 73750 (405)	<u>375-5570</u>	
Counties Served:								
Alfalfa	Beaver	Blaine	Canadian	Cimarron	Custer	Dewey	Ellis	
Garfield	Grant	Harper	Kingfisher	Logan	Major	Oklahoma	Roger Mills	
Texas	Woods	Woodward	_	<u>(E-r</u>	nail: OGKingfi	sherOffice@occe	mail.com)	

	DISTRICT III (D	<u>uncan) District</u>	Office 1111 Wi	llow, Suite 100	Duncan, C	OK 73533 (580) 2	<u>255-0103</u>
			Countie	s Served:			
Beckham	Caddo	Carter	Cleveland	Comanche	Cotton	Garvin	Grady
Greer	Harmon	Jackson	Jefferson	Kiowa	Love	McClain	Murray
Stephens	Tillman	Washita		<u>(E-r</u>	mail: OGDun	canOffice@occe	mail.com)

	DISTRICT IV (Ada) District C	Office 1318 C	Cradduck Rd.	Ada, OK 7482	0 (580) 332	<u>-3441</u>	
Counties Served:								
Atoka	Bryan	Choctaw	Coal	Haskell	Hughes	Johnston	Latimer	
Leflore	McCurtain	McIntosh	Marshall	Okfuskee	Okmulgee	Pittsburg	Pontotoc	
Pottawatomie	Pushmataha	Seminole	Sequoyah	<u>!</u>	(E-mail: OGAdaC	Office@occem	ail.com)	

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		FOR COMMI	SSION USE	ONLY	
Approved	Rejected		Approved	Rejecte	d
	1. API No. invalid	i.			10. Record of pipe pulled incomplete.
	2. Legal Descript	ion invalid for County.			11. Well location does not match plat.
	3. Operator No. r	missing/invalid.			12. Treatable water depth missing.
	4. Well location r	nissing/invalid.			13. Perforation depths missing.
	5. Well name mis	ssing.			14. Information on plug - operator.
	6. Well No. miss	ng.			15. Plugging description missing.
	7. Plugging date	invalid.			16. Plugging contractors name missing.
	8. Well type miss	sing/invalid.			17. Information on plug-cementing company.
	9. Total depth mi	ssing/invalid.			18. Other: