



## RECORD OF WELL PLUGGING OR CHANGE OF WELL STATUS

Required by authority of Part 615 Supervisor of Wells or Part 625 Mineral Wells, of Act 451 PA 1994, as amended. Non-submission and/or falsification of this information may result in fines and/or imprisonment.

- Part 615 Oil or Gas Well                       Part 625 Mineral Well  
 Change of Well Status                       Plugging

		Permit number	Type of well		
		API number			
		Name and address of permittee			
Name and address of contractor/service company		Well name and number			
		Surface location 1/4 of                      1/4 of                      1/4                      Section                      T                      R			
Date plugging/change started	Date plugging/change completed	Township		County	
EGLE employee issuing plugging permit or approving Change of Well Status					
Date issued					
Any change of well status which results in a change of production or a change in injectivity must include production or injection test records. All records must include a narrative or daily chronology and signed certification noted on page 2. High volume hydraulic fracturing must include HVHF Operations Water Withdrawal and Usage Report (EQP 7200-25).					

### WELL PLUGGING

(Hole conditions after plugging)

#### CASING

Casing size	Where set	Amount casing pulled	Depth casing cut/perfed; or windows milled

#### PLUGS

Depth of plug	Make and type of bridge or plug	Cement plugs: type, amount of cement and mix water	Additives, type and percent	Volume and types of spacers/flushes	Wait time	Tagged Top? Y/N
Bottom      Top						

- Check if NORM or other materials were left or reinserted into wellbore. If so, describe materials fully in the Daily Chronology section on reverse.
- Check if equipment radiation survey has been completed and no TENORM was found >20 microR/hour on wellhead, casing, tubulars, etc.
- Check if cores were taken and attach core descriptions.

### CHANGE OF WELL STATUS

Change was to:	<input type="checkbox"/> Convert current zone to: <ul style="list-style-type: none"> <li><input type="checkbox"/> Production</li> <li><input type="checkbox"/> Disposal</li> <li><input type="checkbox"/> Secondary recovery</li> <li><input type="checkbox"/> Storage</li> <li><input type="checkbox"/> Other _____</li> </ul>	<input type="checkbox"/> Remediate well: <ul style="list-style-type: none"> <li><input type="checkbox"/> Perf and test existing zone</li> <li><input type="checkbox"/> Repair casing/cement</li> <li><input type="checkbox"/> Other _____</li> </ul>	<input type="checkbox"/> Plugback (recomplete as): <ul style="list-style-type: none"> <li><input type="checkbox"/> New production zone</li> <li><input type="checkbox"/> Disposal</li> <li><input type="checkbox"/> Secondary recovery</li> <li><input type="checkbox"/> Storage</li> <li><input type="checkbox"/> Other _____</li> </ul>	<input type="checkbox"/> Redrill: <ul style="list-style-type: none"> <li><input type="checkbox"/> Horizontal drain hole</li> <li><input type="checkbox"/> Collapsed casing</li> <li><input type="checkbox"/> Underream open hole</li> <li><input type="checkbox"/> Other: _____</li> </ul>
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COMPLETE BOTH PAGES

<b>RECORD OF WELL PLUGGING OR CHANGE OF WELL STATUS</b>	Permit number	API number
	Well name and number	

Well casing record - BEFORE change (Detail Packer Information for Class II wells)								
Packer Type/Model	Casing		Cement		Perforations			Acid or fracture treatment record
	Size	Depth	Sacks	Type	From	To	If plugged, HOW?	
Packer Depth								

Well casing record - AFTER change, indicate additions and changes only (Detail Packer information for Class II wells)								
Packer Type/Model	Casing		Cement		Perforations			Acid or fracture treatment record
	Size	Depth	Sacks	Type	From	To	If plugged, HOW?	
Packer Depth								

BEFORE CHANGE				AFTER CHANGE			
Total depth	Completed Fm	Well completed for		Total depth	Completed Fm	Well completed for	
BOPD	MCFGPD	Inj Rate	Pressure	BOPD	MCFGPD	Inj Rate	Pressure

DAILY PRODUCTION TEST RECORD					DAILY INJECTION TEST RECORD <input type="checkbox"/> Injection well <input type="checkbox"/> Brine disposal				
Date	Oil (bbls)	Water (bbls)	Gas (Mcf)	Pressure Tubing / Casing	Date	Bbls water or Mcf gas	Pressure Beginning / Ending	Specific gravity of water	

DAILY CHRONOLOGY	
Describe in detail the daily chronology of change/plugging, include days shut down. Describe exceptions to issued plugging instructions. Describe tools, tubing, etc. left in hole and any logs run. Include dates pits filled, surface restored etc. Use additional pages as needed.	
Date	Narrative

NOTICE: Per Part 615 Supervisor of Wells or Part 625 Mineral Wells, Act 451 PA 1994, as amended, a well owner has continuing liability for integrity of a plugged well. CERTIFICATION "I state that I am authorized by said owner. This report was prepared under my supervision and direction. The facts stated herein are true, accurate and complete to the best of my knowledge."

Authorized Representative Name	Signature	Date
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Bonds cannot be terminated and released until plugging is completed; cellar, rat and mouse holes, and pits filled; site leveled and cleaned; and records filed.

Submit within 60 days after completion of plugging/change of well status for a Part 615 oil/gas well, or within 30 days for a Part 625 mineral well to the appropriate District Office email. (For the Upper Peninsula, use EGLE-GeologicalRecords@michigan.gov)

Cadillac: EGLE-OGMD-Records-Cadillac@michigan.gov      Gaylord: EGLE-OGMD-Records-Gaylord@michigan.gov  
 Kalamazoo: EGLE-OGMD-Records-Kalamazoo@michigan.gov      Lansing: EGLE-OGMD-Records-Lansing@michigan.gov  
 Saginaw Bay: EGLE-OGMD-Records-SaginawBay@michigan.gov      SE Michigan: EGLE-OGMD-Records-SEMichigan@michigan.gov

If you need this information in an alternate format, contact EGLE-Accessibility@Michigan.gov or call 800-662-9278.

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