

REPORT ON RESULTS ON PLUGGING WELL (Oil & Gas Form 4)

Permit no.	
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This report must be filed with the Oil & Gas Supervisor, Dep Resources, MS 47007, Olympia, WA 98504-7007, within 15	
You are hereby notified of the completion of the plugging of	a well known as:
Well no: in of section T	N R County:
Latitude/longitude (decimal degrees to four places minimum)	
Total depth is feet. Spud date: D	ate plugging: began completed
Attach a detailed narrative account of the manner in which we quantities of materials used in plugging; the depths and length made; amount, size, and depth of all casing left in the well; ve mudding; and a complete record of any shooting done.	•
Person in charge of plugging:	Phone:
Address:	Email:
City/State/Zip	Fax:
I hereby swear or affirm that the information given herewith it so far as can be determined from available records. Subscribed and sworn to before me on this day of	s a complete and correct record of the well and all work done on
·	Place
Notary Public	My commission expires:
	Signature:
	Name:
	Position:
Representing (company or operator):	
Address:	Phone:
City/State/Zip:	Email: