OTC/OCC No. _____

Form 1006D
Rev. 2020

OIL AND GAS CONSERVATION DIVISION
P.O. Box 52000
Oklahoma City, OK 73152-2000
405-521-2331
ogadmin@occ.ok.gov

OKLAHOMA Corporation Commission

Affidavit of Well Plugging Costs
OAC 165:10-1-10(3); 52 O.S. 318.1
(Please Print or Type in Black Ink Only)

NAME OF WELL PLUGGER:			
MAILING ADDRESS:			
PHYSICAL ADDRESS (if different):			
CITY, STATE and ZIP CODE:			
PHONE NUMBER:		FAX NUMBER:	
CONTACT PERSON:		E-MAIL:	

I, being the above named well plugger being of lawful age and duly sworn under oath, do hereby and state the following, to-wit:
That I am or legally represent a duly Oklahoma Licensed Pipe Pulling and Well Plugging Company under permit No. _____, issued by the Oil and Gas Conservation Division of the Oklahoma Corporation Commission pursuant to OAC:165:10-11-1.
That I have reviewed the information presented to me by

NAME OF OPERATOR:			
MAILING ADDRESS:			
PHYSICAL ADDRESS (if different):			
CITY, STATE and ZIP CODE:			
PHONE NUMBER:		FAX NUMBER:	
CONTACT PERSON:		E-MAIL:	
EMERGENCY CONTACT:		PHONE NUMBER:	

as operator of a proposed well to be drilled and/or of an existing well that is currently producing, and/or being injected into and that it is my professional opinion and estimate that it would cost $_____ in U.S. dollars to properly plug and abandon said well that is more specifically described below. That said estimated plugging cost does not include any salvage value as to recoverable casing, tubing or well head equipment. That said estimated plugging cost includes plugging the well, empty and level all pits, removal of all trash and debris, cleaning and restoring the well site including the tank site and revegetation for each well in accordance with all Oklahoma Corporation Commission Rules inclusively.

That the following information pertains to the proposed well to be drilled and/or the existing well that is currently producing or being used for injection purposes:

WELL NAME and NUMBER:													API NUMBER:	
LEGAL LOCATION:		¼		¼		¼		¼	SEC:		TWP:		RGE:	
COUNTY:									TOTAL DEPTH OF WELL:					
TYPE OF WELL:	OIL:		GAS:			INJECTION:						DISPOSAL:		
CASING IN THIS WELL IS/WILL BE CEMENTED TO THE SURFACE:											**Y**	**N**		

That in the event the above well is a proposed well to be drilled, this Affidavit must be accompanied by an OCC Form 1000, Intent -to-Drill, or;
That in the event the above well is an existing well that is being produced or an injection well, this Affidavit must be accompanied by an OCC Form 1002A, Completion Report.
That this Affidavit was executed this _____ day of _____, 20_____.

Signature of Well Plugger	Name and Title (Type or Print)	Name of Well Plugging Company

STATE OF OKLAHOMA)
) SS:
COUNTY OF _____)

Subscribed and sworn to before me, a Notary Public, This _____ day of _____, 20_____.

My Commission Expires: My Commission Number

(Expiration Date)		Notary Public

FOR COMMISSION USE ONLY

Approved by _____ Date: _____