## MISSISSIPPI STATE OIL & GAS BOARD WORK PERMIT TO PLUG AND ABANDON A WELL UTILIZED FOR NORM DISPOSAL

Well API No.			Work Permit No		OAL		_	
Approximate Date Wo	ork Begins (MM-D	D-YYYY)						
Well Name & No.				Sec.	Sec Twn Rge			
OperatorCode			Code _	Phone	!			
Address								
Field				Cou	unty			
Perforated Interval(s)				Total Depth				
EXISTING CASING PROGRAM					PROPOSED CEMENT PLUGS **			
CASING SIZE	HOLE SIZE	DEPTH SET	TOP OF CEMENT*	DEPTH OF FROM	FPLUGS	#SACKS CEMENT	HOW PLACED	
				FRUIVI	10			
			+					
						-		
* Note source of cement top	o - CBL, calculated, tagge	d, etc.	** Provide sc	hematic diagram of well on	n back of this form.			
Depth to Base of USD\			(<10,000 ppm l	-				
POINT OF ORIGIN:			NORM CONTAMIN	NATED TUBING				
•	d: From	to	Fror	m	_ to			
			Fror					
Total Footage:		ft Maximum Le	vel:	microR/hr	Average Level:		microR/hr	
POINT OF ORIGIN:			NORM SC					
•			То				BBIs	
Average Exposure Rate	e of contaminated s	solids:	To	otal Radium Activity: pCi				
Proposed Mud-Laden	Fluid:		ppg Vi	iscosity			ер	
Remarks:								
Permit requested by:	Туре	/	/ S			Date		
Permit Approved By:	:	Date		ATION USE ONLY				
Permit Denied By:		Date						
Person Denied:								
Comments:								

of NORM solids and/or NORM contaminated tubing/equipment, shall be made on MSOGB Form 20, Work Permit to Plug and Abandon a Well Utilized for NORM Disposal. MSOGB Form 20 is to be submitted to the UIC/Technical Group, 500 Greymont Avenue, Suite E, Jackson, Mississippi 39202 for review. Call 601/354-7127 if you have any questions about completion of MSOGB Form 20.  This work shall be done according to the recommended pr actices in the Memorandum of Agreement (MOA) for Management of Oil and Gas NORM in Mississippi. A MOA between the State Department of Health's Division of Radiologic Health, Department of Environmental Quality and the Mississippi State Oil and Gas Board.  This application will be returned if not properly completed and signed.  The Department of Environmental Quality (DEQ) and the State Department of Health's Division of Radiological Health will be sent a copy of MSOGB Form 20 upon approval. If approved, a copy of MSOGB Form 20 must be attached to the application to perform jobsite (NORM disposal) activities.  Executed this the	Schematic Diagram of Well: (indicate location and depths of casing strings, cement plugs, NORM solids and/or tubing equipment, etc.)							
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Notary Public in and for	Ŋ	•						
My commission expires County  MISSISSIPPI STATE OIL & GAS BOARD WORK PERMIT TO PLUG AND ABANDON A WELL	My commission expires	MISSISSIPPI STATE OIL & GAS BOARD						

MISSISSIPPI STATE OIL & GAS BOARD WORK PERMIT TO PLUG AND ABANDON A WELL UTILIZED FOR NORM DISPOSAL

FORM 20

A. P. I. WELL NUMBER COUNTY

WELL