



**STATE OF TENNESSEE**  
 DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
 DIVISION OF WATER RESOURCES  
 TENNESSEE OIL AND GAS PROGRAM  
 711 R. S. GASS BLVD.  
 NASHVILLE, TENNESSEE 37216

WELL PERMIT NO. \_\_\_\_\_

County: _____
Quad: _____
Carter's: Sec. _____
T: _____ R: _____
FNL: _____ FEL: _____
FSL: _____ FWL: _____
LAT: _____
LONG: _____
<b>(DO NOT WRITE IN THIS BOX FOR STATE USE ONLY)</b>

**Plug and Abandon Report**

**Notice: Must Be Filed Within 30 Days From Date Well Is Plugged**

Operator: _____ Telephone: _____ Alt Phone: _____ Permanent Address: _____ _____ Mailing Address : _____ _____
Well Name: _____ Well Permit No: _____ Well Latitude: _____ Well Longitude: _____ Well Total Depth: _____
Was Well Filled With Cement? <input type="checkbox"/> Yes <input type="checkbox"/> No Total Amount of Cement Used: _____ Please Indicate the <b>Size, Kind, and Depth</b> of all plugs used. Also Indicate zones squeezed cemented, make certain to give the amount of cement in each zone. _____ _____ _____
<b>Date Well was Plugged:</b> _____
<b>Notice: You Must Have an Inspector sign this form before it is considered complete.</b>  <b>Inspector's Signature:</b> _____ <b>Name (printed):</b> _____
If this Well was Plugged back for use as a fresh water well, give all pertinent details of plugging operation to base of fresh water sand, perforated interval to fresh water sand, name and address of surface owner, and attach a notarized letter from surface owner authorizing completion of this well as a water well and agreeing to assume liability for any subsequent plugging which might be required. _____ _____ _____
I certify under penalty of law that this document and all attachments were prepared by me, or under my direction or supervision. The submitted information is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury.  Please attach additional sheets if necessary.  <b>Operator's Signature:</b> _____ <b>Name (printed):</b> _____ <b>Date:</b> _____