

MISSOURI DEPARTMENT OF NATURAL RESOURCES GEOLOGICAL SURVEY PROGRAM

OIL AND GAS WELL CONVERSION TO A WATER WELL APPLICATION

WELL OWNER INF	ORMATION								
OPERATOR NAME				OPERATOR LICE	NSE NUMBER				
Will the well remain under the current operator's ownership? ☐ Yes ☐ No Is the ownership of this well being transferred to a landowner? ☐ Yes ☐ No (If yes, please complete landowner section below)									
		nsferred to a landowner?	∐ Yes ∐ No (If yes, plea	ise comple	te landowner s	ection below	/)	
LANDOWNER INFO	DRMATION								
LANDOWNER NAME									
MAILING ADDRESS			CITY	STATE		ZIP CODE	COUNTY		
EMAIL ADDRESS		PRIMARY PHONE NUMBER WITH A			ITH AREA COD	E			
WELL INFORMATION	ON								
API NUMBER	ON	WELL NUMBER	LEASE NAME	ASE NAME			COUNTY		
ATHOMBEN		WEEL NOMBER	LEAGE NAME				COOM		
DEPTH TO FRESH WATER	FRESH WATER PR	RODUCING STRATUM NAME		WELL TYPE	☐ Inj	jection P	roduction	☐ Stratigraphic Test	
FT. Unknow						ther			
PRE CONVERSION	REQUIREM	ENTS							
If this well is being transferred from an operator to a landowner, an oil and gas transfer of well(s) and/or transfer of injection permit(s) form must be submitted with this conversion to a water well application.									
Per 10 CSR 50-2.060(well:	4) Conversion t	o Domestic Water Suppl	y Well, the followir	ng is require	ed for conv	version of an oi	l and gas we	ell to a domestic water	
An oil and gas well conversion to a water well application must be submitted within thirty (30) calendar days after proposed conversion of the well. The substantial proposed conversion of the well.									
 The well must have been reconstructed, or for a stratigraphic test well, must have been constructed, as a water well by a Missouri permitted water well installation contractor and must meet water well construction standards as set forth in the Water Well Drillers Act, Chapter 256, RSMo and the implementing Missouri Well Construction Rules 10 CSR 23. 									
		ation, as appropriate per applicable bond.	those rules, shall	be receive	d before th	ne state geologi	ist will appro	ve the conversion	
WELL CONVERSION	N INFORMA	TION							
NAME OF WATER WELL INS		PERMIT NU	PRIMARY PHONE NU			H AREA CODE			
WELL CERTIFICATION/REGISTRATION NUMBER						DATE OF CONSTRUCTION/RECONSTRUCTION			
CERTIFICATION									
I, the undersigned, cer	tify that:								
I am authoriz	zed to act as an	agent for the fore ment	•						
 The facts stated herein are true, correct and complete to the best of my knowledge. I understand this form shall be submitted no less than thirty (30) days after the conversion of the oil and gas well to a domestic water supply well. 									
		d am in compliance with tion Rules 10 CSR 23.	the Missouri Code	of State R	egulations	Oil and Gas Co	ouncil Rules	10 CSR 50-2.060(4)	
 I understand that upon approval of this conversion, future regulation of this well must be in compliance with Missouri Code of State Regulations Missouri Well Construction Rules 10 CSR 23. 									
LANDOWNER SIGNATURE						DATE			
EOD OFFICE USE	ONI V								
FOR OFFICE USE ONLY APPROVED BY						DATE			
						LOIGH GURVEY			