

**STATE OF WEST VIRGINIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS**

AFFIDAVIT OF PLUGGING AND FILLING WELL

AFFIDAVIT SHOULD BE IN TRIPLICATE, one copy mailed to the Department, one copy to be retained by the Well Operator and the third copy (and extra copies if required) should be mailed to each coal operator at their respective addresses.

Farm name: _____ Operator Well No.: _____

LOCATION: Elevation: _____ Quadrangle: _____

District: _____ County: _____

Latitude: _____ Feet South of _____ Deg. _____ Min. _____ Sec.

Longitude: _____ Feet West of _____ Deg. _____ Min. _____ Sec.

Well Type: OIL _____ GAS _____

Company _____ Coal Operator _____
_____ or Owner _____

Agent _____ Coal Operator _____
_____ or Owner _____

Permit Issued Date _____

AFFIDAVIT

STATE OF WEST VIRGINIA,
County of _____ ss:

_____ and _____ being first duly sworn according to law depose and say that they are experienced in the work of plugging and filling oil and gas wells and were employed by the above named well operator, and participated in the work of plugging and filling the above well say that said work was commenced on the _____ day of _____, 20____, and the well was plugged and filled in the following manner:

TYPE	FROM	TO	PIPE REMOVED	LEFT

Description of monument: _____ and that the work of plugging and filling said well was completed on the _____ day of _____, 20____.

And further deponents saith not. _____

Sworn and subscribe before me this _____ day of _____, 20____

My commission expires: _____

Notary Public

Affidavit reviewed by the Office of Oil and Gas: _____ Title: _____