

GEOTHERMAL ENERGY EXTRACTION PLUGGING RECORD (SHALLOW WELL)

INDIUSTRIAL COMMISSION OF NORTH DAKOTA GEOLOGICAL SURVEY SFN 58699 (11/07) (8-ge)

Please read the instructions on the back of the form

Name of facility owner or operator	ame of facility owner or operator Permit No.		iit No.	
Name of person to whom correspondence should be mailed concerning this form				
Name of facility				
Address	City	State	Zip Code	
Well field location Section: T: R:		County		
Date wells were spudded	Date wells were plugged			
Number of wells	Well depth (feet)			
Type of heat transfer solution	Volume of heat transfer solution			
How was the heat transfer solution disposed of?				
Description of plugging method				

Name of company or operator		
Signature	Title	Date

INSTRUCTIONS

BE SURE THAT YOU HAVE READ AND THOROUGHLY UNDERSTAND THE RULES AND REGULATIONS OF THE INDUSTRIAL COMMISSION OF NORTH DAKOTA GEOLOGICAL SURVEY.

Within 30 days after the plugging of any well has been accomplished, the owner or operator thereof shall file 2 copies of this form with the State Geologist, 600 E. Boulevard Avenue, Bismarck, ND 58505-0840, setting forth in detail the method used in plugging the well field.