



# WELL TERMINATION RECORD

This record is submitted in compliance with Section 184.(1) of the *Canada Oil and Gas Drilling Regulations (SOR/79-82)*.

Well Name: \_\_\_\_\_  
 Well ID: \_\_\_\_\_ Area: \_\_\_\_\_  
 Grid Area: \_\_\_\_\_ Field / Pool: \_\_\_\_\_  
 Interest Identifier: \_\_\_\_\_ Total Depth: \_\_\_\_\_ m  
 Coordinates (NAD 27): Lat.: \_\_\_\_\_ Long.: \_\_\_\_\_  
 Elevation-KB/RT: \_\_\_\_\_ m GL / Seafloor: \_\_\_\_\_ m  
 Spud Date: \_\_\_\_\_ Rig Release Date: \_\_\_\_\_

**CASING AND CEMENTING PROGRAM**

O.D. (mm)	Weight (kg/m)	Grade	Depth Set (m KB)	Cement (m³)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**PLUGGING PROGRAM**

Type of Plug	Interval (m KB)	Felt	Depth (m KB)	Cement (m³)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Lost Circulation/Overpressure Zones: \_\_\_\_\_  
 Equipment left on Seafloor (Describe): \_\_\_\_\_  
 Provision for Re-entry (Describe and attach sketch): \_\_\_\_\_  
 Cores: Type: \_\_\_\_\_ Interval: \_\_\_\_\_ m \_\_\_\_\_ m  
 \_\_\_\_\_ m \_\_\_\_\_ m  
 Other Downhole Completion/Suspension: \_\_\_\_\_

**CERTIFICATION**

"I certify on the basis of personal knowledge of operations undertaken at the above named well that the above information is accurate."

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
 Name: \_\_\_\_\_ Operator: \_\_\_\_\_  
 Title: \_\_\_\_\_ Telephone: \_\_\_\_\_

**NEB USE ONLY**

Current Well Status	Date: _____	Acknowledged by: _____
Suspended <input type="checkbox"/>	File: _____	<i>Chief Conservation Officer</i>
Completed <input type="checkbox"/>	WID: _____	
Abandoned <input type="checkbox"/>	UWI: _____	