



**Form 1003A**  
**Notice of Temporary Exemption from Well Plugging**  
**OAC 165:5-3-1(b)(1)(W); OAC 165:10-1-7(b)(10)**

**PAYMENT REQUIRED \$100.00 Per Well**  
**Fee refunds are prohibited under OAC 165:5-3-1(a)(2)-(3)**

<input type="checkbox"/> ORIGINAL			<input type="checkbox"/> AMENDED			<input type="checkbox"/> RENEWAL			Original Application Date:		
Operator						OCC/OTC Number					
Address						Phone Number					
City		State		Zip Code		Email					
Lease/Well Name/Number				API No.		OTC Lease No.					
Spot Loc'n	1/4	1/4	1/4	1/4	Ft. From South Line Of Quarter Section			Ft. From West Line Of Quarter Section			
Sec.	Twp.	Rge.	County		Completion Date		Date Last Produced/Used as Utility Well				
Is well located on a valid or producing lease or unit? <input type="checkbox"/> YES <input type="checkbox"/> NO					Depth to Base of Treatable Water:		Surface Casing Set At:				
<b>Latest Test Data:</b>		Test Date	Oil BBLs		Water BBLs		Gas MCFD				
PRODUCING FORMATION(S)					PERFORATIONS			SPACING SIZE/ORDER NO.			

**REASON FOR EXEMPTION FROM PLUGGING**


**METHOD OF TEMPORARY PLUGGING FOR THE PROTECTION OF THE TREATABLE WATER SANDS**

<b>1. BRIDGING PLUG</b>			<b>2. TUBING WITH WITH PACKER</b>			<b>3. FLUID LEVEL TEST</b>		
Brand/Type			Brand/Type			Method		
Depth Set			Depth Set			Depth to Fluid		
Top of Cement			Top of Cement			Type of Fluid		

DATE OF FLUID LEVEL SURVEY \_\_\_\_\_ WITNESSED BY OCC \_\_\_\_\_ FIELD INSPECTOR \_\_\_\_\_  
Signature

I hereby certify that I am authorized to submit this application, which was prepared by me or under my supervision and direction. The facts and proposals made herein are true to the best of my knowledge and belief.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT OR TYPE NAME AND TITLE

\_\_\_\_\_  
DATE

Refer to Rule 165:10-11-9 for additional information concerning Temporary Exemption from Plugging of Wells.

**FOR COMMISSION USE ONLY**

**APPROVED**

This exemption, if approved, shall be valid until \_\_\_\_\_  
If approved, one copy will be returned to the operator stamped "approved".

**DISAPPROVED**

If disapproved, all materials will be returned to the operator  
with a note as to why the request was rejected.

\_\_\_\_\_  
**District Manager**

\_\_\_\_\_  
**District**

\_\_\_\_\_  
**Date**