

STATE OF LOUISIANA
OFFICE OF CONSERVATION
INACTIVE WELL REPORT

COMPANY: _____
 ADDRESS: _____

CODE NO. _____

DATE: _____
 DISTRICT: _____

FIELD	WELL NAME	WELL NO.	SERIAL NO.	Date of production or ceased as Service Well	Utility Status Code	Proposed future for well <i>(See codes in instructions)</i>	Date scheduled for abandonment.

See Instructions on Reverse Side