



**Illinois Department of Natural Resources**  
 One Natural Resources Way Springfield, Illinois 62702-1271

[www.dnr.illinois.gov](http://www.dnr.illinois.gov)

(217) 782 - 7756



**OG-15A INSPECTOR'S TEMPORARY ABANDONMENT REPORT**

**Reference #:** \_\_\_\_\_ **LOCATION** Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_  
**Permittee #:** \_\_\_\_\_ County: \_\_\_\_\_ LAT: \_\_\_\_\_ LONG: \_\_\_\_\_  
**Permittee Name:** \_\_\_\_\_  
**Well Name:** \_\_\_\_\_  
**Well Type:**  Oil Production  Gas Production  Injection

Evaluation

Does the well have a proper bond?	<input type="radio"/> Yes	<input type="radio"/> No
Is the well in the plugging fund?	<input type="radio"/> Yes	<input type="radio"/> No
Is the wellhead above ground?	<input type="radio"/> Yes	<input type="radio"/> No
Is the well capped with a valve and configured to monitor casing or annular pressure?	<input type="radio"/> Yes	<input type="radio"/> No
Is the well equipped with an intact leak free wellhead?	<input type="radio"/> Yes	<input type="radio"/> No
Has the lease been inactive over the last 24 consecutive months?	<input type="radio"/> Yes	<input type="radio"/> No

Method used to meet TA requirements: \_\_\_\_\_

Comments:

\_\_\_\_\_  
*Inspector's Name*

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

emailed to:

























