OMB No. 2040-0042 Approval Expires 4/30/2022

EPA

United States Environmental Protection Agency

COMPLETION REPORT FOR INJECTION WELLS

Name, Address, Phone Number and/or Email of Permittee

State

County

Permit (or EPA ID) Number

API Number

Full Well Name

Locate well in two directions from nearest lines of quarter section and drilling unit

Surface Location

1/4 of 1/4 of Section Township Range

ft. from (N/S) Line of quarter section

ft. from (E/W) Line of quarter section.

Latitude

Longitude

Anticipated Daily Injection Volume (Bbls)

Average

Maximum

Injection Interval (Perforated/Open Hole Interval)

Feet

to Feet

Depth to Bottom of Lowermost USDW (Feet)

Date Drilling Began

Date Drilling Completed

Date Well Completed

Name of Injection Zone

Fracture Pressure of Injection Zone

Permeability of Injection Zone

Porosity of Injection Zone

Complete Attachments; See Instructions.

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibliity of fine and imprisonment. (Ref. 40 CFR § 144.32)

Name and Official Title *(Please type or print)*

Signature

Date Signed

INSTRUCTIONS FOR FORM 7520-18

This form must be completed for each injection well. This form is appropriate for all injection well classes, and replaces the previous Form 7520-9 and Form 7520-10. While reports or other information developed by contractors or service companies may be attached, this form must be signed by a responsible entity as described at 40 CFR 144.32.

NAME, ADDRESS, PHONE AND/OR EMAIL OF PERMITTEE: Enter the name and street address, city/town, state, and ZIP code of the permittee. Also provide an email address (if available) and/or a phone number.

Enter the **STATE** and **COUNTY** where the well is located. For States that do not have counties, use the name of that State's equivalent jurisdiction at a more local level.

PERMIT OR EPA ID NUMBER: Enter the well identification number or permit number assigned to the injection well by the EPA or the permitting authority.

API NUMBER: Enter the number assigned by the local jurisdiction (usually a State Oil and Gas Agency) using the American Petroleum Institute standard numbering system.

FULL WELL NAME: Enter the full name of the well or project.

WELL LOCATION: Fill in the complete township, range, and section to the nearest quarter-quarter section. A township is north or south of the baseline, and a range is east or west of the principal meridian (e.g., T12N, R34W). Also include the distance, in feet, from the nearest north or south line and nearest east or west line of the quarter-section. Also, enter the **latitude** and **longitude** of the well in decimal degrees, to five or six places if possible; be sure to include a negative sign for the longitude of a well in the Western Hemisphere and a negative sign for the latitude of a well in the Southern Hemisphere.

ANTICIPATED DAILY INJECTION VOLUME: Enter the anticipated **average** and **maximum** daily volume of fluid to be injected, in barrels.

INJECTION INTERVAL: Enter the depths, in feet, to the top and bottom of the perforated hole/open interval of the well through which injected fluids will exit the well. (Note: this is different from the depth of the injection zone.) Provide information about how these were derived, e.g., by attaching a step-rate test or other test results. (See the description of attachments below.)

Enter the **DEPTH TO BOTTOM OF THE LOWERMOST USDW** (i.e., formation containing less than 10,000 mg/L total dissolved solids), in feet.

Enter the **DATE DRILLING BEGAN**, the **DATE DRILLING WAS COMPLETED**, and the **DATE THE WELL WAS COMPLETED** in the appropriate blanks.

Enter information about the permitted injection formation, including the **NAME OF THE INJECTION ZONE**, the calculated **FRACTURE PRESSURE**, and the **PERMEABILITY** and **POROSITY** of the injection zone in the appropriate blanks.

CERTIFICATION: This form must be signed and dated by either: a responsible corporate officer for a corporation, by a general partner for a partnership, by the proprietor of a sole proprietorship, or by a principal executive or ranking elected official for a public agency.

PAPERWORK REDUCTION ACT NOTICE: The public reporting and recordkeeping burden for this collection of information is estimated to average between 3.3 and 3.9 hours per response, depending on the injection well class. Burden means the total time, effort, or financial resource expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal Agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to the collection of information; search data sources; complete and review the collection of information; and, transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including the use of automated collection techniques to Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed forms to this address.

INSTRUCTIONS FOR COMPLETING ATTACHMENTS TO FORM 7520-18

Please attach the following information to the completion report. Reports prepared by contractors or service companies may be submitted, provided they are clear and legible and the requested information is accessible. Please be sure to specify units as needed, e.g., of depth, pressure, temperature, etc.

I. Geologic Information

1. Provide a geologic description of the rock units penetrated by name, age, depth, thickness, and lithology of each rock unit penetrated.

2. Provide information about the injection formation that supports the information provided on the form, for example: (1) name; (2) depth (drilled); (3) thickness; (4) formation fluid pressure; (5) age of unit; (6) bottom hole temperature; (7) lithology; and (8) bottom hole pressure.

3. Provide chemical characteristics of formation fluid, including a chemical analysis.

4. Provide a description of all USDWs, including: (1) depth below ground surface to base of fresh water (less than 10,000 mg/L TDS); and (2) a geologic description of aquifer units with name, age, depth, thickness, lithology, and average total dissolved solids.

II. Well Design and Construction

1. Provide information on the surface, intermediate, and long string casing and tubing. Describe: the materials used; outside diameter size; weight/foot, grade, and whether new or used; and the depth to which each casing string is set (include appropriate units, e.g., below ground surface, below Kelly bushing, etc.).

2. Provide data on the holes drilled for each casing string, including the bit diameter and depth of hole.

3. Provide data on the well cement for each casing string, such as type/class, additives, amount, method of emplacement, and depth to top of cement.

4. Describe the packer (if used) such as type, name and model, setting depth, and type of annular fluid used.

5. Provide data on centralizers, including number, type, and depth.

6. Provide data on bottom hole completions, including the depth and diameter of the hole.

III. Monitoring Systems. Describe the recording and nonrecording injection pressure gauges, casing-tubing annulus pressure gauges, injection rate meters, temperature meters, and other meters or gauges. Also provide information on constructed monitoring wells such as location, depth, casing diameter, method of cementing, etc.

IV. Logging and Testing Results. Provide a report describing the types of geophysical logs, cores, and other tests performed; date of the logs; the intervals logged; and interpretation of the results. Include a description and the results of deviation checks run during drilling. If requested, provide a final print of all geophysical logs run.

V. As-built Schematic. Provide a diagrammatic sketch of the surface and subsurface construction details of the injection well as-built, showing casing, cement, tubing, packer, etc., with proper setting depths. The sketch should include the well head and gauges.

VI. Mechanical Integrity Testing. Provide data demonstrating mechanical integrity pursuant to 40 CFR 146.08. Describe the method and results of mechanical integrity testing.

VII. Report on the compatibility of injected wastes with fluids and minerals in both the injection zone and the confining zone.

VIII. Report the status of corrective action on deficient wells in the area of review.

IX. Include the anticipated maximum pressure and flow rate at which injection will operate.

X. Stimulation. Describe any stimulation performed, including the interval treated and the materials and amounts used.