



ARKANSAS OIL AND GAS COMMISSION

Submit To Appropriate Regional Office

Fort Smith Regional Office
3309 Phoenix Avenue
Fort Smith, Arkansas 72903
Fax: (479) 646-7656

El Dorado Regional Office
P. O. Box 11510
El Dorado, Arkansas 71730
Fax: (870) 862-8823

FORM 2B
NOTICE OF CLOSURE FOR DRILLING AND RESERVE PITS

Purpose of Form: Original Amendment

Name of Applicant (Permit Holder)

Address: Street/P.O. Box

City State Zip

Email Phone Fax

Emergency Phone Number

Well Name(s) and Number(s) located at this well pad:

List all well names and numbers that utilized the pit(s):

Date pit was last utilized in the drilling process or as part of a frac water recycling system:

Location of associated drilling and resource pits:

Section 1/4 Twp Range Latitude Longitude

County Field

Drilling and Reserve Pit information

Dimensions of drill pad ft x ft Size of drill pad acres

Dimensions of drilling or reserve pit ft x ft Size of pit acres

Type of drilling system: Air Closed-loop Fluid system

Type of drilling fluid: Freshwater based Oil based Air/mist

Disposition of fluid: Class II Injection Well Land farm Class 1 Landfill NPDES or state permitted facility

Pumped down the well bore Reused at another location Other

Was a synthetic liner used: Yes No If yes was the synthetic liner removed: Yes No

Was pit filled with native materials and restored as close to the original contours as possible: Yes No

Has a stormwater erosion and sediment control plan been prepared for this site: Yes No

Distance to the nearest city or town boundary:

Distance to the nearest Waters of the State:

Approximate date of pit closure:

CERTIFICATE

I declare under the penalties of perjury that this report has been examined by me and to the best of my knowledge is true, correct and complete.

Signature Title Date

Typed or Clearly Printed Name

For Additional Use: