



OFFICE OF PERMITTING AND COMPLIANCE

CLASS II ANNULAR SALT WATER DISPOSAL WELL
PERMIT APPLICATION

MAILING ADDRESS
OFFICE OF PERMITTING AND COMPLIANCE
617 North 3rd St., 9th Floor
Baton Rouge, LA 70802

UIC-9

APPLICATION NO.
(FOR OFFICE USE ONLY)

1. APPLICATION TO (CHECK ONE):

INITIAL APPLICATION FOR AN ANNULAR SALT WATER DISPOSAL INJECTION WELL

RE-PERMIT APPLICATION FOR AN ANNULAR SALT WATER DISPOSAL INJECTION WELL

OPERATOR INFORMATION

2. OPERATOR NAME		3. OPERATOR CODE	
4. OPERATOR MAILING ADDRESS		5. CITY, STATE, ZIP CODE	
6. APPLICANT TELEPHONE NUMBER (WITH AREA CODE)		7. APPLICANT EMAIL ADDRESS	

WELL LOCATION INFORMATION

8. WELL NAME & NUMBER				9. SERIAL NUMBER (CONVERSION OR RE-PERMIT ONLY)		
10. FIELD NAME	11. FIELD CODE	12. PARISH NAME	13. PARISH CODE	14. SEC	15. TWN	16. RNG
17. LEGAL LOCATION DESCRIPTION						

18. GEOGRAPHIC COORDINATE SYSTEM (NAD 27)			19. STATE PLANE COORDINATES (LAMBERT, NAD 27)				<input type="checkbox"/> NORTH ZONE <input type="checkbox"/> SOUTH ZONE
LATITUDE		LONGITUDE		LAMBERT-X		LAMBERT-Y	
DEG	MIN	SEC	DEG	MIN	SEC		

WELL CONSTRUCTION INFORMATION

CASING AND LINER RECORD

20. CASING SIZE (OD-INCHES)	21. HOLE SIZE (INCHES)	22. CASING WEIGHT (LB/FT)	23. CASING GRADE	24. CASING SETTING DEPTHS		25. TOTAL CEMENT USED (SACKS)	26. LEAD			27. TAIL		
				TOP (FEET)	BOTTOM (FEET)		AMOUNT (SACKS)	YIELD (CU FT/SACK)	TYPE (CLASS)	AMOUNT (SACKS)	YIELD (CU FT/SACK)	TYPE (CLASS)

28. METHOD OF PRODUCTION:

FLOWING BEAM PUMP SUBMERSIBLE PUMP OTHER: _____

