



# OFFICE OF CONSERVATION

## CLASS V STORAGE WELL PERMIT APPLICATION

**MAILING ADDRESS**  
 OFFICE OF CONSERVATION  
 617 North 3<sup>rd</sup> St.  
 Baton Rouge, LA 70802

### UIC-55 Storage

APPLICATION NO.  
(FOR OFFICE USE ONLY)

<b>1. APPLICATION TO (CHECK ONE):</b>	<input type="checkbox"/> CONVERT BRINE EXTRACTION WELL TO STORAGE WELL <input type="checkbox"/> DRILL NEW STORAGE WELL IN EXISTING CAVERN <input type="checkbox"/> RE-PERMIT AN EXISTING STORAGE WELL/CAVERN <input type="checkbox"/> DUALY PERMIT CLASS V WELL WITH CLASS III (UIC-3 BR ALSO REQUIRED) <input type="checkbox"/> OTHER: _____	<input type="checkbox"/> NEW PROPOSED AREA PERMIT <input type="checkbox"/> PREVIOUSLY APPROVED AREA PERMIT <input type="checkbox"/> NO PROPOSED AREA PERMIT
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**2. WELL TO BE USED FOR STORAGE OF (Identify stored material):** \_\_\_\_\_

**3. OFFICE OF CONSERVATION ORDER NO. (IF APPLICABLE):** \_\_\_\_\_

#### OPERATOR INFORMATION

<b>4. OPERATOR NAME</b>			<b>5. OPERATOR CODE</b>		
<b>6. OPERATOR MAILING ADDRESS</b>		<b>7. CITY</b>	<b>8. STATE</b>	<b>9. ZIP CODE</b>	
<b>10. TELEPHONE NUMBER</b>		<b>11. EMAIL ADDRESS</b>			
<b>12. FACILITY NAME</b>			<b>13. CONTACT NAME</b>		
<b>14. FACILITY MAILING ADDRESS</b>		<b>15. CITY</b>	<b>16. STATE</b>	<b>17. ZIP CODE</b>	
<b>18. TELEPHONE NUMBER</b>		<b>19. EMAIL ADDRESS</b>			
<b>20. PROPOSED WELL NAME AND NUMBER</b>		<b>21. SERIAL NUMBER (CONVERSION OR RE-PERMIT ONLY)</b>			

#### WELL INFORMATION

The information in boxes 25-34 must match the current Location Plat (Attachment 2) exactly.

<b>22. SALT DOME FIELD NAME</b>		<b>23. FIELD CODE</b>	<b>24. SEC</b>	<b>TWN</b>	<b>RNG</b>
<b>25. PARISH NAME</b>		<b>26. PARISH CODE</b>			
<b>27. LOCATION DESCRIPTION</b>					

<b>28. GEOGRAPHIC COORDINATE SYSTEM (NAD 27) REQUIRED</b>			<b>29. STATE PLANE COORDINATES (LAMBERT, NAD 27) IF AVAILABLE</b>			
LATITUDE		LONGITUDE		LAMBERT-X	LAMBERT-Y	<input type="checkbox"/> NORTH ZONE  <input type="checkbox"/> SOUTH ZONE
DEG	MIN	SEC	DEG	MIN	SEC	
<b>30. GEOGRAPHIC COORDINATE SYSTEM (NAD 83) IF AVAILABLE</b>			<b>31. STATE PLANE COORDINATES (LAMBERT, NAD 83) IF AVAILABLE</b>			
LATITUDE		LONGITUDE		LAMBERT-X	LAMBERT-Y	<input type="checkbox"/> NORTH ZONE  <input type="checkbox"/> SOUTH ZONE
DEG	MIN	SEC	DEG	MIN	SEC	

#### PROPOSED WELL CONSTRUCTION INFORMATION

The information in boxes 35-58 must match the information reported on Attachment 6B (Well Construction Diagram) and Attachment 6C (Work Prognosis).

32. CASING SIZE (IN.)	33. HOLE SIZE (IN.)	34. CASING WEIGHT	35. DEPTH SET		36. SACKS CEMENT	37. CEMENT CLASS or YIELD (CU.FT/SACK)	38. TOP OF CEMENT DEPTH <small>(Indicate if the depth is from a CBL or Calculated)</small>
			TOP (FT.)	BOTTOM (FT.)			

<b>HANGING STRING DATA</b>							
39. OD SIZE (IN)	40. WEIGHT (LB/FT)	41. GRADE	42. SETTING DEPTH				
			TOP (FT)	BOTTOM (FT)			
43. PACKER (OPTIONAL):	<input type="checkbox"/> PERMANENT	<input type="checkbox"/> COMPRESSION	MAKE:	MODEL:	DEPTH SET (FT):		
	<input type="checkbox"/> TENSION	<input type="checkbox"/> OTHER:					
<b>CAVERN / STORAGE DATA</b>							
44. DEPTH OF PROPOSED INJECTION ZONE: (FROM TOP OF SALT TO BOTTOM OF CAVERN)			TOP (FT)		BOTTOM (FT)		
45. DEPTH OF PROPOSED SALT CAVERN: (FROM TOP OF CAVERN TO BOTTOM OF CAVERN)			TOP (FT)		BOTTOM (FT)		
46. ELEVATION OF DATUM: (AMSL/BMSL)		47. DATUM: <input type="checkbox"/> BHF <input type="checkbox"/> KB <input type="checkbox"/> GL <input type="checkbox"/> OTHER		48. DRILLED DEPTH (FT)			
49. DEPTH TO USDW (FT)		50. DEPTH TO TOP OF CAP ROCK (FT)		51. LATEST SONAR DATE			
52. REFERENCE TO E-LOG: (SN)		53. DEPTH TO TOP OF SALT (FT)		54. DEPTH (FT)			
				55. VOLUME (BBLS)			
<b>MECHANICAL DATA</b>							
56. FRACTURE PRESSURE OF SALT AT CASING SHOE DEPTH (PSI):							
57. FRACTURE PRESSURE PROJECTED TO THE SURFACE (WITH STORED MATERIAL IN STORAGE) ON THE PRODUCT SIDE OF THE INJECTION STRING. GIVE ALL CALCULATIONS:							
58. CONSTITUENTS TO BE STORED AND EXPECTED RANGE OR PERCENTAGE OF EACH CONSTITUENT							
<b>OTHER INFORMATION</b>							
<i>If needed, describe in greater detail in the application's technical report.</i>							
59. DESCRIBE WHAT MEANS WILL BE (OR HAVE BEEN) USED TO DEMONSTRATE THAT THE WELL AND CAVERN WILL HAVE MECHANICAL INTEGRITY PRIOR TO THE INITIATION OF STORAGE OPERATIONS:							
60. DESCRIBE WELLHEAD PROTECTION FROM MECHANICAL DAMAGE BY TRESPASSERS AND ACCIDENTAL PHYSICAL DAMAGE:							
61. DESCRIBE SURFACE STORAGE FACILITIES (TANKS, PITS, ETC.):							

62. IS THE PROPOSED WELL, SALT CAVERN, OR SURFACE FACILITY ON INDIAN LANDS OR OTHER LANDS OWNED BY OR UNDER THE JURISDICTION OR PROTECTION OF THE FEDERAL GOVERNMENT?	<input type="checkbox"/> YES <input type="checkbox"/> NO
63. IS ANY CONVENTIONAL MINING (DRY OR ROOM-AND-PILLAR) ACTIVITY OCCURRING OR HAS SUCH ACTIVITY OCCURRED WITHIN THE SALT STOCK REGARDLESS OF DISTANCE TO THE PROPOSED STORAGE CAVERN?	<input type="checkbox"/> YES <input type="checkbox"/> NO
64. IS THE MAXIMUM DIAMETER OF THE PROPOSED STORAGE CAVERN LESS THAN 100 FEET FROM THE PROPERTY BOUNDARY OF THIS APPLICANT?	<input type="checkbox"/> YES <input type="checkbox"/> NO
65. AS MEASURED IN ANY DIRECTION, ARE THE MINIMUM DISTANCES BETWEEN THE WALLS OF THE PROPOSED STORAGE CAVERN AND ADJACENT SALT CAVERNS OR ANY MANMADE STRUCTURES WITHIN THE SALT STOCK LESS THAN 200 FEET?	<input type="checkbox"/> YES <input type="checkbox"/> NO
66. AS MEASURED IN ANY DIRECTION, ARE THE MINIMUM DISTANCES BETWEEN THE WALLS OF THE PROPOSED SALT CAVERN AND THE PERIPHERY OF THE SALT STOCK LESS THAN 300 FEET?	<input type="checkbox"/> YES <input type="checkbox"/> NO
67. HAS ANY PORTION OF THE PROPOSED SALT CAVERN COALESCED OR BEEN PROPOSED TO BE COALESCED WITH AN ADJACENT SALT CAVERN?	<input type="checkbox"/> YES <input type="checkbox"/> NO

**PLEASE CHECK EACH BOX THAT CORRESPONDS TO ALL APPLICABLE ATTACHMENTS INCLUDED WITH THIS APPLICATION**

<input type="checkbox"/> FILING FEE <input type="checkbox"/> ATTACHMENT 1 – COPIES OF EXISTING ORDERS AND UIC-FORMS <input type="checkbox"/> ATTACHMENT 2 – LOCATION PLAT <input type="checkbox"/> ATTACHMENT 3 – AREA OF REVIEW <input type="checkbox"/> 3A – MAPS AND RELATED INFORMATION <input type="checkbox"/> 3B – MANMADE STRUCTURES LIST (WITHIN SALT STOCK) <input type="checkbox"/> 3C – AREA OF REVIEW MAP(S) <input type="checkbox"/> 3D – AREA OF REVIEW LISTS (ALL WELLS WITHIN 1,320 FT RADIUS) <input type="checkbox"/> 3E – AREA OF REVIEW LIST (WELLS PENETRATING CAP ROCK & SALT) <input type="checkbox"/> ATTACHMENT 4 – HYDROLOGY <input type="checkbox"/> 4A – FRESHWATER WELLS MAP <input type="checkbox"/> 4B – UNREGISTERED FRESHWATER WELLS LIST <input type="checkbox"/> 4C – DNR WATER WELL PRINTOUT <input type="checkbox"/> 4D – LABORATORY ANALYSES OF WATER SAMPLES <input type="checkbox"/> 4E – SOURCES OF MINING WATER <input type="checkbox"/> ATTACHMENT 5 – SURFACE FACILITY DIAGRAM <input type="checkbox"/> ATTACHMENT 6 – WELL DESIGN AND CONSTRUCTION <input type="checkbox"/> 6A – WELLHEAD SCHEMATIC <input type="checkbox"/> 6B – WELL CONSTRUCTION DIAGRAM	<input type="checkbox"/> 6C – WORK PROGNOSIS <input type="checkbox"/> 6D – MATERIAL COMPATABILITY REPORT <input type="checkbox"/> ATTACHMENT 7 – ELECTRIC LOGS AND SONAR SURVEY REPORTS <input type="checkbox"/> 7A – ELECTRIC LOGS <input type="checkbox"/> 7B – SONAR SURVEY REPORTS <input type="checkbox"/> ATTACHMENT 8 – CORE SAMPLING STUDY REPORTS <input type="checkbox"/> ATTACHMENT 9 – WELL AND CAVERN MECHANICAL INTEGRITY TESTS <input type="checkbox"/> ATTACHMENT 10 – STRUCTURE MAP AND CROSS-SECTIONS <input type="checkbox"/> ATTACHMENT 11 – TECHNICAL REPORT <input type="checkbox"/> ATTACHMENT 12 – SAFETY PLAN <input type="checkbox"/> ATTACHMENT 13 – SUBSIDENCE MONITORING PLAN <input type="checkbox"/> ATTACHMENT 14 – CLOSURE AND POST-CLOSURE PLANS <input type="checkbox"/> ATTACHMENT 15 – FINANCIAL RESPONSIBILITY <input type="checkbox"/> ATTACHMENT 16 – ADJACENT LANDOWNERS <input type="checkbox"/> ATTACHMENT 17 – WELL HISTORY AND WORK RESUME REPORT <input type="checkbox"/> ATTACHMENT 18 – IT QUESTIONS <input type="checkbox"/> ATTACHMENT 19 – NOTICE OF INTENT <input type="checkbox"/> DUPLICATE COPY OF THE APPLICATION <input type="checkbox"/> ELECTRONIC COPY OF THE APPLICATION
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**AUTHORIZED AGENT**

68. AGENT OR CONTACT AUTHORIZED TO ACT FOR THE OPERATOR DURING PROCESSING OF THIS APPLICATION.

THE SIGNATURE OF THE OPERATOR CERTIFYING THIS APPLICATION WILL AUTHORIZE THIS AGENT OR CONTACT TO SUBMIT ADDITIONAL INFORMATION AS REQUESTED AND TO GIVE ORAL STATEMENTS IN SUPPORT OF THIS APPLICATION DURING THE APPLICATION REVIEW PROCESS. ANY CORRESPONDENCE (INCLUDING NOTICES OF DEFICIENCIES) GENERATED DURING THE REVIEW PROCESS OF THIS APPLICATION WILL BE SENT TO WHOMEVER IS LISTED IN THIS BOX. THE FINAL WRITTEN DECISION ON THIS APPLICATION WILL BE SENT TO THE OPERATOR NOTED IN BOX 1 OF THIS FORM.

NAME:  
 COMPANY:  
 ADDRESS:  
 PHONE:  
 EMAIL:

WRITTEN CORRESPONDENCE SHOULD BE SENT TO (CHOOSE ONE):  OPERATOR  AUTHORIZED AGENT

**CERTIFICATION BY OPERATOR**

*The signature below must be obtained from a duly appointed employee of the operating company.*

*I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application 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 possibility of fine and imprisonment (LSA-RS 30:17).*

69. NAME (PRINT)	70. TITLE (PRINT)
71. SIGNATURE	72. DATE













**NOTICE OF INTENT  
OFFICE OF CONSERVATION  
INJECTION AND MINING DIVISION**

In accordance with the laws of the State of Louisiana and the particular reference to the provisions of La R.S. 30:4 et seq., and the provisions of Statewide Order No. 29-M-5 (LAC 43:XVII.Chapter 37) as amended and adopted by the Office of Conservation of the State of Louisiana,

(Company Name)

(Address)

(City, State Zip)

(Phone)

will be applying to the Office of Conservation, Injection and Mining Division for a permit to store **(Product Type)** in a solution-mined salt cavern in the **(Salt Dome Name)** salt dome.

The well is proposed to be in Section **(Section No.)**, Township **(Township)**, Range **(Range)**, **(Field Name)** Field, **(Parish Name)** Parish, Louisiana. The proposed well is identified as the **(Well Name)** Well No. **(Well No.)**, Serial Number **(for Conversions and Repermits Only)**.

The top of the storage cavern is proposed to be at **(Top of Cavern)** feet with its base at **(Bottom of Cavern)** feet.

Once submitted, the application will be available for inspection from 8:00 a.m. to 4:00 p.m., Monday through Friday in the Injection and Mining Division Office, Rm. 817, LaSalle Building, 617 North Third Street, Baton Rouge, LA.

Interested parties may request to receive notice when the application is submitted, be included on the public notice or public hearing mailing list, or address other public participation related questions by contacting the Injection and Mining Division by calling (225) 342-5515, by e-mailing [injection-mining@la.gov](mailto:injection-mining@la.gov), or by mailing Office of Conservation, Injection and Mining Division, 617 North 3<sup>rd</sup> St., Baton Rouge, La, 70802.

When corresponding, please reference the name of the applicant, the well name and number, the well serial number, and the salt dome.