**INVENTORY OF INJECTION WELLS**

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF GROUND WATER AND DRINKING WATER

(This information is collected under the authority of the Safe Drinking Water Act)

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<thead>
<tr>
<th>1. DATE PREPARED (Year, Month, Day)</th>
<th>2. FACILITY ID NUMBER</th>
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<th>3. TRANSACTION TYPE</th>
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<th>4. FACILITY NAME AND LOCATION</th>
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<td>A. NAME (last, first, and middle initial)</td>
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<td>B. STREET ADDRESS/ROUTE NUMBER</td>
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<td>J. INDIAN LAND (mark &quot;x&quot;)</td>
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<th>5. LEGAL CONTACT:</th>
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<th>6. WELL INFORMATION:</th>
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<tbody>
<tr>
<td>A. TYPE (mark &quot;x&quot;)</td>
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<td>A. CLASS AND TYPE</td>
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<tr>
<td>Owner</td>
<td>Operator</td>
<td>B. NUMBER OF WELLS</td>
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<td>C. TOTAL NUMBER OF WELLS</td>
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<td>D. WELL OPERATION STATUS</td>
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**COMMENTS** (Optional):

**KEY:**

- **DEG** = Degree
- **MIN** = Minute
- **SEC** = Second
- **TOWN** = Township
- **RANGE** = Range
- **SECT** = Section
- **1/4 SECT** = Quarter Section

- **COMM** = Commercial
- **NON-COMM** = Non-Commercial
- **AC** = Active
- **UC** = Under Construction
- **TA** = Temporarily Abandoned
- **PA** = Permanently Abandoned and Approved by State
- **AN** = Permanently Abandoned and not Approved by State

EPA Form 7520-16 (Rev. 8-01)
INJECTION WELL CLASS AND TYPE CODES

CLASS I

- Water (USDW) used to inject waste below the lowermost Underground Source of Drinking Water

- Oil and Gas Production and Storage Related Injection Wells

CLASS II

- Annular Disposal Well

- Special Process Injection Wells

CLASS III (CONT'D.)

- Other Class III Wells

- Enhanced Recovery Well

CLASS IV

- Produced Fluid Disposal Well

CLASS V

- Mine Backfill Well

- Drainage Well

- Experimental Technology Well

- Septic Systems

- Daytime Use Well

INSTRUCTIONS AND DEFINITIONS

SECTION 1. DATE PREPARED:

Fill in the date in order of year, month, and day.

SECTION 2. FACILITY ID NUMBER:

Place an “x” in the applicable box to indicate the type of ID Number.

A. Type

- S - State Facility Number
- G - GSA Number
- D - DUNS Number

B. Number of Commercial and Non-Commercial Wells

Enter the total number of commercial and non-commercial wells located at the listed facility. Use the most pertinent code (specified below) to accurately describe each type of injection well. For example, 2R for a Class II Enhanced Recovery Well or 3M for a Class III Solution Mining Well, etc.

C. Latitude

Enter the facility’s latitude (all latitudes assume North Except for American Samoa).

D. Longitude

Enter the facility’s longitude (all longitudes assume North Except for Guam).

E. Township/Range

Fill in the complete township and range.

F. City/Town

Self Explanatory.

G. State

Insert the five digit zip code plus any extension.

H. Zip Code

Fill in the U.S. Postal Service State abbreviation.

I. Numeric County Code

Insert the numeric county code from the Code developed by the U.S. Census Bureau in Pub 6-1) June 15, 1970, U.S. Department of Commerce, National Bureau of Standards. For Alaska, use the Census Division code developed by the U.S. Census Bureau.

J. Indian Land

Mark an “x” in the appropriate box (Yes or No) to indicate if the facility is located on Indian land.

SECTION 3. TRANSACTION TYPE:

Place an “x” in the applicable box in Class I.

A. Entry Change

- Deletion
- Replacement
- First Time Entry

B. Type

- INJECTION WELL

C. Subtype

- Other Class I Wells
- Annular Disposal Well
- Special Process Injection Wells
- Other Class II Wells
- Enhanced Recovery Well
- Produced Fluid Disposal Well
- Other Class III Wells
- Commercial and Non-Commercial Wells
- Commercial Wells
- Non-Commercial Wells

SECTION 4. FACILITY NAME & LOCATION (CONT'D.):

Fill in the complete township and range.

A. Name

Self Explanatory.

B. Street Address

Self Explanatory.

C. Latitude

Enter the facility’s latitude (all latitudes assume North Except for American Samoa).

D. Longitude

Enter the facility’s longitude (all longitudes assume North Except for Guam).

E. Township/Range

Fill in the complete township and range.

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SECTION 5. LEGAL CONTACT:

If the legal contact is an individual, give the name of the business organization to expedite mail distribution.

A. Name

Self Explanatory.

B. Organization

Self Explanatory.

C. Phone

Self Explanatory.

D. Street/P.O. Box

Insert the U.S. Postal Service State abbreviation.

E. City/Town

Self Explanatory.

F. State

Self Explanatory.

G. State Facility Number

Insert the appropriate nine digit DUNS, GSA, or S - State Facility Number. For example, A Federal facility (GSA - 123456789) located in Virginia would be entered as : VAG123456789.

H. Zip Code

Insert the five digit zip code plus any extension.

I. Ownership

Place an “x” in the appropriate box to indicate the type of ownership status.

- J - Joint Owners
- T - Trustee
- O - Other

J. Other Information

Insert any additional information.

SECTION 6. WELL INFORMATION:

Enter the number of wells for each specified Class/Type, as applicable.

A. Class and Type

Mark an “x” in the appropriate box (Yes or No) to indicate the type Class/Type under each operation status (see key on other side).

B. Number of Commercial and Non-Commercial Wells

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SECTION 7. GROUNDS INFORMATION:

Describe the grounds in detail.

SECTION 8. FACILITY NAME & LOCATION (CONT'D.):

Fill in the complete township and range.

A. Name

Self Explanatory.

B. Street Address

Self Explanatory.

C. Latitude

Enter the facility’s latitude (all latitudes assume North Except for American Samoa).

D. Longitude

Enter the facility’s longitude (all longitudes assume North Except for Guam).

E. Township/Range

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J. Indian Land

Mark an “x” in the appropriate box (Yes or No) to indicate if the facility is located on Indian land.

SECTION 9. GROUNDS INFORMATION:

Describe the grounds in detail.

SECTION 10. INSTALLATIONS:

Describe any installations.

SECTION 11. WATER QUALITY:

Describe the water quality.

SECTION 12. WASTE DISPOSAL:

Describe the waste disposal.

SECTION 13. OTHER OPERATIONS:

Describe any other operations.

SECTION 14. SUMMARY:

Provide a summary of the information provided.

SECTION 15. REMARKS:

Insert any additional remarks.

SECTION 16. CERTIFICATION:

Certify that the information is accurate and complete.

SECTION 17. SIGNED:

Sign the form.

SECTION 18. DISTRIBUTION:

Distribute the form as required by law.