

**Application for authorization to close a well– Schedule 5  
Mining Act (R.S.Q., c. M-13.1)**

**Part A – Identification of applicant**

Name of applicant			
Address		Telephone number ( )	Fax number ( )
Name of well	Well number	Number of the exploration licence or of the lease to produce or the lease to operate	
Signature for the applicant X		Title	Date

**Part B – Description of operations****Closing program**

Plug number	Interval or depth	Type of plug	Characteristics of cement

Date of the beginning of operations	Type of closing Temporary <input type="checkbox"/> Permanent <input type="checkbox"/>	Estimated closing costs
Description of the characteristics of the blowout preventer equipment		

**Part C – Engineer responsible for the operations**

Family name and first name of engineer	Telephone number ( )	Fax number ( )
Address		
Signature X	O.I.Q. member No	Date

**Part D – Contractor in charge of closing**

Name of contractor	Telephone number ( )	Fax number ( )
Address	Type of earth-boring machine	Number of earth-boring-machine

**ESPACE RÉSERVÉ AU MINISTÈRE DES RESSOURCES NATURELLES ET DE LA FAUNE**

Nom de l'inspecteur	Date de l'inspection	Numéro de la déclaration	Date de libération de la caution
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