CASING REPORT
Patrolling & Electrical Tests

Company: _____ Town: _____

Casing Location: _____ Casing type: ☐ Bare ☐ Coated ☐ Other: _____

Carrier pipe: ☐ Bare ☐ Coated ☐ Other: _____ Patrolling intervals: ☐ 4 / yr. ☐ 2 / yr. ☐ yearly

Date	Carrier pipe/soil	Casing pipe/soil	If shorted, steps taken to determine if electrical isolation is practical	Method of patrolling (F.I., C.G.I., etc.)	Line Marker Yes or No	Name

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