Form CP-111 March 2009 Form must be Typed Form must be signed

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

OPERATOR: License#					API No. 15					
Name:				Spot Description:						
Address 1:					Sec	: Twp.	S. R		E W	
Address 2: State: Zip: +				feet from N / S Line of Section feet from E / W Line of Section						
										GPS Location: Lat:
				/ell #:						
				Elevation: GL KB						
					(check one) 🗌 O					
				Field Contact Person Phone: ()					SWD Permit #: ENHR Permit #:	
	Conductor	Surface	Pr	oduction	Intermediat	e	Liner	Tubing		
Size										
Setting Depth										
Amount of Cement										
Top of Cement										
Bottom of Cement										
Depth and Type:	I ALT. II Depth o	f: DV Tool:(depth)	w / Inch	Set at:	s of cement F	Port Collar:(de			of cement	
Geological Data:										
Formation Name	Formation ⁻	Top Formation Base			Comp	letion Information	1			
1		to Fee	t Perfo	oration Interval	·			to	Feet	
2	At:	to Feet		oration Interval		Feet or Oper			Feet	
		Submitt	ed Ele	ectronicall	y					
Do NOT Write in This Space - KCC USE ONLY	Date Tested:	R		Date Plugge	d: Date Repa	nired: Date	Put Back in Ser	vice:		
Review Completed by:		Comments: TA Ap					_ TA Approve	pproved: Yes Denied Denied		
		Mail to the App	oropriate	KCC Conserv	ration Office					
Server State State State State Land States S	KCC Distri	ct Office #1 - 210 E. Fro						Phone 620.22	25.8888	

