KANSAS CORPORATION COMMISSION 1062512	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:						•	R 🗆 E 🔲 W	
Address 2:							I / S Line of Section	
City:	State	e: Zip:	+				/ W Line of Section	
Contact Person:				GPS Location: Lat:, Long:				
Phone:()					Lease Name: Well #:			
Contact Person Email:				Elevation:_	Elevation: GL KB			
Field Contact Person:				Well Type:	Well Type: (check one) Oil Gas OG WSW Other:			
Field Contact Person Phone: ()					SWD Permit #: ENHR Permit #:			
)				Gas Storage Permit #:				
				Spud Date:		Date Shut-in:		
	Conduct	tor Surfa	ace P	Production	Intermediate	Liner	Tubing	
Size								
Setting Depth								
Amount of Cement								
Top of Cement								
Bottom of Cement								
Casing Fluid Level:		How Determine	2d3			Date:		
Casing Squeeze(s):								
Depth and Type: Junk i Type Completion: ALT. Packer Type:	.I ALT. II	Depth of: DV Too	vI:w /	sack	s of cement Port Co	ollar: w /		
Total Depth:								
				ag _aoo				
Geological Data:								
Formation Name Formation Top Formation Base Completion Information								
1	At:	to				·	al toFeet	
2	At:	: to	Feet Per	foration Interval	to Fee	et or Open Hole Interva	al toFeet	
			Submitted Ele	octronicall	V			
		`	Submitted En	Continuan	у			
		·						
Do NOT Write in This Space - KCC USE ONLY		Date Tested: Results:			Date Plugged: Date Repaired: Date Put Back in Service:			
Review Completed by:		Comments: TA Approx					ved: Yes Denied Denied	
			to the Appropriate				<u> </u>	
Description to the last facts and facts being to	F P	KCC District Office #1 -	210 E. Frontview, S	uite A, Dodge C	ity, KS 67801		Phone 620.225.8888	

