

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1068131

Form CP-4

March 2009

Type or Print on this Form

Form must be Signed

All blanks must be Filled

WELL PLUGGING RECORD K.A.R. 82-3-117

_				API No.	15		
Name:					scription:		
Address 1:					Sec T	wp S. R	East West
					Feet from	North / So	outh Line of Section
City:				Feet from East / West Line of Section			
Contact Person:				Footages Calculated from Nearest Outside Section Corner:			
Phone: ()					NE NW	SE SW	
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Catho	odic	County:			
Water Supply Well Other: SWD Permit #:				Lease Name: Well #:			
ENHR Permit #: Gas Storage Permit #:				Date Well Completed:			
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				The plugging proposal was approved on: (Date)			
Producing Formation(s): Lis	t All (If needed attach anot	her sheet)		by:		(KCC D	istrict Agent's Name)
Depth to Top: Bottom: T.D				Plugging Commenced:			
Depth to Top: Bottom: T.D				Plugging Completed:			
Depth	to Top: Bo	ttom:T.D		100	, ,		
Show depth and thickness of		mations.					
Oil, Gas or Wat		Casing Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
1							
	er in which the well is plu	aged indicating where the mi	ud fluid wae				
cement or otner plugs were		of same depth placed from (b			nd the method or metho ch plug set.	ods used in introducir	ng it into the hole. If
Plugging Contractor License	used, state the character	of same depth placed from (b	oottom), to (t	top) for ea	ch plug set.		
Plugging Contractor License	used, state the character	of same depth placed from (b	oottom), to (t	top) for ea	ch plug set.		
Plugging Contractor License	used, state the character	of same depth placed from (b	_ Name: Address	top) for ea	ch plug set.		
Plugging Contractor License Address 1: City: Phone: ()	used, state the character	of same depth placed from (b	Name: _ Address	2:	ch plug set.	Zip:	
Plugging Contractor License Address 1: City: Phone: ()	used, state the character	of same depth placed from (b	Name: _ Address	2:	ch plug set.	Zip:	
Plugging Contractor License Address 1: City: Phone: () Name of Party Responsible	e #:for Plugging Fees:	of same depth placed from (b	_ Name: Address	2:	ch plug set.	Zip:	

Submitted Electronically

(Print Name)

the same are true and correct, so help me God.

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and