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

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License#				API No. 15Spot Description:											
								Address 1:					Sec	Twp S. R	R 🗆 E 🔲 W
Address 2:							/ S Line of Section								
City:	State:	Zip: +					/ W Line of Section								
Contact Person: Phone:() Contact Person Email: Field Contact Person: Field Contact Person Phone:()				GPS Location: Lat:											
									,			_	rage Permit #:		
									Conductor	Surface	Pro	oduction	Intermediate	Liner	Tubing
								Size							
								Setting Depth							
Amount of Cement															
Top of Cement															
Bottom of Cement															
				Date:											
Casing Squeeze(s):	o) to w /	sacks of ce	ment, _	to	W /	sacks of cement. D	ate:								
Do you have a valid Oil & G	Gas Lease? Yes	No													
Denth and Type:	in Hole at	Tools in Hole at	Ca	sing Leaks.	Yes No Denth	of casing leak(s):									
Depth and Type: Junk															
Type Completion: ALT						(depth)	Sack of certien								
Packer Type:															
Total Depth:	Plug Bad	ck Depth:		Plug Back Metho	od:										
Geological Data:															
Formation Name	Formation	Top Formation Base			Completion I	nformation									
1	At:	to Feet	Perfo	ration Interval _	to Fee	t or Open Hole Interval	toFeet								
2		to Feet	Perfo	ration Interval_	to Fee	t or Open Hole Interval	l toFeet								
		Submitt	ed Ele	ctronically	У										
-						-									
Do NOT Write in This Date Test Space - KCC USE ONLY		Results:			Date Plugged:	Date Repaired: Date	e Put Back in Service:								
Review Completed by:		Comme			ents: TA Approved: Yes Denied										
		Mail to the App	ranriata	VCC Consoru	ration Office.										
		man to the App	opilate	NOC CONSEN	ation office.										

