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. 15-							
Name:				Spot Description:					
Address 1:					· Sec	Twp	_ S. R	🗆 E	\square W
Address 2:						feet from [_ N / :	S Line of S	3ection
City:	State:	Zip: +						W Line of S	3ection
Contact Person:		County:	on: Lat:	, Long: _ xxxx)	xx) , Long:				
Phone:()				Well #:					
Contact Person Email:				Elevation:					GL 🗌 KB
				Well Type: (check one) Oil Gas OG WSW Other: SWD Permit #: ENHR Permit #: Gas Storage Permit #:					
Field Contact Person Phon									
					orage Permit #:		n:		
	Conductor	Surface	Pro	duction	Intermediate	Liner		Tubing	
Size									
Setting Depth									
Amount of Cement									
Top of Cement									
Bottom of Cement									
		Date:							
Casing Squeeze(s):	o) to w /	sacks of c	ement,	to	W /	sacks of ceme	ent. Date:		
Do you have a valid Oil & G	Gas Lease? Yes	No							
Depth and Type:	in Hole at	Tools in Hole at	Ca	sing Leaks:	Yes No Depth	n of casing leak(s): _			
Type Completion: ALT									cemen
Packer Type:									
•									
Total Depth:	Plug Bad	ck Depth:		Plug Back Meth	od:				
Geological Data:									
Formation Name	Formation	Top Formation Base			Completion	n Information			
1	At:	to Fee	t Perfo	ration Interval	to Fe	eet or Open Hole Ir	nterval	to	Feet
2	At:	to Fee	t Perfo	ration Interval	to Fe	eet or Open Hole Ir	nterval	to	Feet
		Ouds as it	4 a al 🗀 a	-t!!!					
	~	Submit	tea Ele	ctronicall	y 				
Do NOT Write in This	Deta Tasta di	Date Tested: Results:			Data Diversal	Deta Deneinado	Data Dat Da	alain Oamia	
Do NOT Write in This Space - KCC USE ONLY			results.		Date Plugged:	Date Repaired:	ate Repaired: Date Put Back in Service:		
Review Completed by:	Comments:				TA Approved: Yes Denied				
		Mail to the An		VCC Canaan	ration Office.				

Mail to the Appropriate KCC Conservation Office:

