

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

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

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

## 1080918

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

Spot Description:   Spot	OPERATOR: License #:				API No. 1	5		
State:   Zip:   Feet from   North /   South Line of Section   South Line of	Name:				Spot Description:			
City: State: Zip: +	Address 1:					Sec	Гwp S.	R East West
Contact Person:    Chonce (	Address 2:					Feet from	North /	South Line of Section
Phone: (	City:				Feet from East / West Line of Section			
Type of Well: (Check one)   Oil Well   Gas Well   OG   D&A   Cathodic   Water Supply Well   Other:   SVID Permit #:   Loase Name:   Well Completed:   Loase Name:   Well Compl	Contact Person:				Footages Calculated from Nearest Outside Section Corner:			
Water Supply Well   Other:	Phone: ( )					NE NW	SE	sw
Water Supply Well   Other:	Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	lic	County:			
ENHR Permit #:	Water Supply Well Other: SWD Permit #:				Lease Name: Well #:			
ACC-1 filled?	ENHR Permit #: Gas Storage Permit #:							
Depth to Top: Bottom: T.D. Plugging Commenced: Plugging Commenced: Plugging Completed: Show depth and thickness of all water, oil and gas formations.  Oil, Gas or Water Records Casing Size Setting Depth Pulled Out  Content Casing Size Setting Depth Pulled Out  Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. It becament or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.  Plugging Contractor License #: Name:  Address 1: Address 2: State: Zip: + Phone: ( ) Name of Party Responsible for Plugging Fees:  State of County. State of County. Operator on above-described well	Is ACO-1 filed? Yes No If not, is well log attached? Yes No				The plugging proposal was approved on:			
Depth to Top: Bottom: T.D. Plugging Commenced:	Producing Formation(s): List A	All (If needed attach another	r sheet)		by:			(KCC <b>District</b> Agent's Name)
Depth to Top: Bottom:	Depth to	o Top: Botto	m: T.D		Plugging	Commonand:		,
Show depth and thickness of all water, oil and gas formations.  Oil, Gas or Water Records  Casing Record (Surface, Conductor & Production)  Formation  Content  Casing  Size  Setting Depth  Pulled Out  Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. It is plugged in the character of same depth placed from (bottom), to (top) for each plug set.  Pluggling Contractor License #:  Name:  Address 1:  Address 2:  City:  State:  Zip:   Phone: ()  Name of Party Responsible for Plugging Fees:  State of  County,   State of  County,   Constant on above-described well  Fingleyee of Operator or  Operator on above-described well	Depth to Top: Bottom: T.D							
Oil, Gas or Water Records  Casing Record (Surface, Conductor & Production)  Formation  Content  Casing  Size  Setting Depth Pulled Out  Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. It is plugging Contractor License #:  Plugging Contractor License #:  Address 1:  Address 2:  City:  State:  Zip:  **  **  **  **  **  **  **  **  **	Depth to	o Top: Botto	m:T.D		r lugging v	Sompleted		
Oil, Gas or Water Records  Casing Record (Surface, Conductor & Production)  Formation  Content  Casing  Size  Setting Depth Pulled Out  Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. It is plugging Contractor License #:  Plugging Contractor License #:  Address 1:  Address 2:  City:  State:  Zip:  **  **  **  **  **  **  **  **  **								
Formation Content Casing Size Setting Depth Pulled Out  Casing Size Setting Depth Pulled Out  Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. It becament or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.  Plugging Contractor License #:	Show depth and thickness of	all water, oil and gas forma	ations.					
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Plugging Contractor License #:	Formation	Content	Casing	Size		Setting Depth	Pulled Ou	ut
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Address 1:	cement or other plugs were u	sed, state the character of	same depth placed from (both	ttom), to (	top) for eacl	n plug set.		
City:	Plugging Contractor License #:			Name: _				
Phone: ( )								
Name of Party Responsible for Plugging Fees:	City:				State:		Zip:	+
State of	Phone: ( )				-			
Employee of Operator or Operator on above-described well	Name of Party Responsible for	or Plugging Fees:						
Employee of Operator or Operator on above-described well,	State of	County, _			, SS.			
		(Print Name)			_	ployee of Operator or	Operat	tor on above-described well,

Submitted Electronically

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