

**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

## 1085086

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

OPERATOR: License #:				API No. 15			
Name:				Spot Description:			
Address 1:				SecTwp S. R EastWest Feet from North / South 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 Cathodic				County:			
Water Supply Well Other: SWD Permit #:							
ENHR Permit #: Gas Storage Permit #:				e Well Completed:			
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				e vveil Completed e plugging proposal was ap			
Producing Formation(s): List All (If needed attach another sheet)				by: (KCC <b>District</b> Agent's Name)			
Depth to Top: Bottom: T.D							
Depth to Top: Bottom: T.D				Plugging Commenced:			
Depth to Top: Bottom: T.D				Plugging Completed:			
Show depth and thickness of	of all water, oil and gas	formations.					
Oil, Gas or Wa	ter Records		Casing Recor	d (Surface, Conductor & Pro	duction)		
Formation	Content	Casing	Size	Setting Depth Pulled Out			
		plugged, indicating where the ter of same depth placed from					
Plugging Contractor License #:			Name:				
Address 1:			Address 2:				
City:			Sta	te:	Zip:	+	
Phone: ( )							
Name of Party Responsible	for Plugging Fees:						
State of	Cou	inty,	, S	S.			
		·	,	Employee of Operator	On Oneroter and	above-described well,	
	(Print Na			_ Employee of Operator (	or Operator on a	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