

**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

## 1091814

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. 1                                       | 5                                       |   |  |
|--|-------------------|---------------------|---|---|---|--|
| Name:                                      |                   |                     |   | Spot Description:                       |   |  |
| Address 1:                                 |                   |                     |   | Sec T                                   | wp S. R East Wes                          |  |
| Address 2:                                 |                   |                     |   | Feet from North / South Line of Section |   |  |
| City:                                      |                   |                     |   | Feet from East / West Line of Section   |   |  |
| Contact Person:                            |                   |                     | Footages  | Calculated from Neare                   | est Outside Section Corner:               |  |
| Phone: ( )                                 |                   |                     |   | NE NW                                   | SE SW                                     |  |
| Type of Well: (Check one)                  |                   |                     | ic County: _                                    |   |   |  |
| Water Supply Well                          | SWD Permit #:     | I                   | Lease Name: Well #:                             |   |   |  |
| ENHR Permit #: Gas Storage Permit #:       |                   |                     |   | Date Well Completed:                    |   |  |
| Is ACO-1 filed? Yes                        | No If not, is wel | I log attached? Yes | A.  |   | roved on: (Date                           |  |
| Producing Formation(s): List A             |                   | r sheet)            | by:   |   | (KCC <b>District</b> Agent's Name         |  |
| Depth to                                   |                   | m: T.D              | l Plugging                                      | Commenced:                              |   |  |
| Depth to                                   | m: T.D            | ""                  | Plugging Completed:                             |   |   |  |
| Depth to                                   | o Top: Botto      | m:T.D               |   |   |   |  |
|  |                   |                     |   |   |   |  |
| Show depth and thickness of                |                   | ations.             |   |   |   |  |
| Oil, Gas or Water Records                  |                   |                     | Casing Record (Surface, Conductor & Production) |   |   |  |
| Formation                                  | Content           | Casing              | Size  | Setting Depth                           | Pulled Out                                |  |
|  |                   |                     |   |   |   |  |
|  |                   |                     |   |   |   |  |
|  |                   |                     |   |   |   |  |
|  |                   |                     |   |   |   |  |
|  |                   |                     |   |   |   |  |
| cement or other plugs were us              | . 00              |                     | •   |   | ids used in introducing it into the hole. |  |
| Plugging Contractor License #:             |                   |                     |   | ame:                                    |   |  |
| Address 1:                                 |                   |                     | Address 2:                                      |   |   |  |
| City:                                      |                   |                     | State:  |   | Zin                                       |  |
|  |                   |                     | Glate   |   |   |  |
| Phone: ( )                                 |                   |                     |   |   | +   |  |
| , ,  |                   |                     |   |   | +   |  |
| Phone: ( )<br>Name of Party Responsible fo | or Plugging Fees: |                     |   |   | +   |  |

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