

**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

## 1094517

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:				Sec Twp S. R East West		
Address 2:				Feet from North / South Line of Section		
City:				Feet from East / West 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 Cat Water Supply Well Other: SWD Permit #:  ENHR Permit #: Gas Storage Permit #:  Is ACO-1 filed? Yes No If not, is well log attached? Yes			Leas Date	County:		
Producing Formation(s): List All (If needed attach another sheet)				by: (KCC <b>District</b> Agent's Name)		
		m: T.D				
Depth to	m: T.D	Plugging Commenced:				
Depth to	o Top: Botto	m:T.D	Plugg	Plugging Completed:		
Show depth and thickness of	all water, oil and gas forma	ations.				
Oil, Gas or Water Records			Casing Record	asing Record (Surface, Conductor & Production)		
Formation	Content	Casing	Size	Setting Depth	Pulled Out	
cement or other plugs were us			•		ods used in introducing it into the hole. If	
Plugging Contractor License #:			Name:			
Address 1:			Address 2:			
City:			State	:	Zip:+	
Phone: ( )						
Name of Party Responsible fo	or Plugging Fees:					
State of	County		. 88			
				Franksis of Orest	Operator on alternative to the	
(Print Name)				Employee of Operator or	Operator 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