Form CP-111 March 2009 Form must be Typed Form must be signed

## TEMPORARY ABANDONMENT WELL APPLICATION All blanks must be complete

OPERATOR: License#	DPERATOR: License#				API No. 15-					
Name:				Spot Description:						
Address 1:					Sec	Twp	S. R	🗆 Е	: W	
Address 2:						feet from		5		
City:	GPS Location: Lat:									
Contact Person:				County:	on: Lat:	.xxxxx) , Long	(e.gxxx.xxxxx)			
							Well #:			
				Elevation:	Elevation: GL					
Field Contact Person:	Well Type: (check one) Oil Gas OG WSW Other:  SWD Permit #: ENHR Permit #:  Gas Storage Permit #:  Spud Date: Date Shut-In:									
Field Contact Person Phon										
	T			Opua Bato.		Date Office				
	Conductor	Surface	Pr	oduction	Intermediate	Liner		Tubing		
Size										
Setting Depth										
Amount of Cement										
Top of Cement										
Bottom of Cement										
Casing Fluid Level:	Ho	ow Determined?				Date:				
Casing Squeeze(s):	to w/	sacks o	f cement, _	to	w/	sacks of cer	nent. Date:_			
	´ _ ´ ´ _	_		(top) (	(bottom)					
Do you have a valid Oil & G										
Depth and Type:  Junk	in Hole at	☐ Tools in Hole at —	Ca (depth)	asing Leaks:	Yes No Dep	oth of casing leak(s):				
Type Completion: ALT	Γ. I ALT. II Depth o	f: DV Tool:	w / _	sacks	of cement Por	t Collar:	w /	sack of	cement	
Packer Type:										
Total Depth:	Plug Back Metho	od:								
				o .						
Geological Data:										
Formation Name		Top Formation Base			•	on Information				
1		to F								
2	At:	to F	eet Perfo	oration Interval_	to	Feet or Open Hole	Interval	to	Feet	
		Cubm	itted Ele	otropically						
		Subii	iillea Eie	ectronically	/					
					<del></del>					
Do NOT Write in This	Date Tested: Results:				Date Plugged: Date Repaired: Date Put Back in Service:					
Space - KCC USE ONLY	·									
Review Completed by:		Comments:				TA Approved: Yes Denied D				
		Mail to the A	Appropriate	KCC Conserva	ation Office:					

