June 2011 Form must be Typed Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

000004700 1: "														
OPERATOR: License#				API No. 15										
									Contact Person:					
									Phone:()					
Contact Person Email:														
Field Contact Person:														
Field Contact Person Phone: ()									Gas Storage Permit #:					
												in:		
	Conductor	Surface	Pr						oduction	Intermediate	Liner		Tubing	
Size														
Setting Depth														
Amount of Cement														
Top of Cement														
Bottom of Cement														
Casing Squeeze(s): (top) Do you have a valid Oil & G Depth and Type:	in Hole at(depth) I I ALT. II Depth Size:	No Tools in Hole at	Ca pth)	asing Leaks: sack	Yes No Depth s of cement Port C	of casing leak(s):								
Geological Date:														
Formation Name		Formation Top Formation Base		Completion Information										
1		to Fee												
2	At:	to Fee	et Perfo	oration Interval	to Fe	et or Open Hole I	nterval	toFeet						
INDED DENALTY OF DEE	IIIDV I LIEDEDV ATT	ECT TUAT THE INCODM	ATION CO	NTAINED HEE	DEIN ISTRIIE AND CO	DDEATTA THE D	EST OF MV	VNOW! EDGE						
		Submit	ted Ele	ectronicall	у									
Do NOT Write in This Space - KCC USE ONLY			Results:		Date Plugged:	Date Plugged: Date Repaired: Date Put Back in Service:								
Review Completed by:			Comr	ments:										
TA Approved: Yes		:												

Mail to the Appropriate KCC Conservation Office:

