Form CP-111 June 2011 Form must be Typed

Form must be signed All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License#				API No. 15 Spot Description:																
										Address 1:				·	· Sec	Twp	S. R	E	W	
Address 2:							_	_												
City: State: + Contact Person:																				
										Contact Person Email: Field Contact Person: Field Contact Person Phone: ()					Lease Name:					
	Conductor	Surface	Pro	oduction	Intermediate	Liner		Tubing												
Size																				
Setting Depth																				
Amount of Cement																				
Top of Cement																				
Bottom of Cement																				
Casing Fluid Level from Sur	face:	How Det	ermined?				Date: _													
Casing Squeeze(s):	to w/	sacks of cer	ment,	to	w/	sacks of cem	ent. Date: _													
رون) Do you have a valid Oil & G	·	_		(top)	(bottorn)															
		_		–	J															
Depth and Type:	in Hole at	Tools in Hole at (depth	Ca	sing Leaks: L	」Yes	h of casing leak(s):														
Type Completion: ALT.	. I ALT. II Depth of	of: DV Tool:	w/_	sacks	s of cement Port	Collar:(depth)	w /	sack of c	ement											
Packer Type:																				
Total Depth:	Plug Bad	ck Depth:		Plug Back Meth	od:															
				Ü																
Geological Date:																				
Formation Name		Top Formation Base			•	n Information														
1	At:	to Feet	Perfo	ration Interval				to	_Feet											
2	At:	to Feet	Perfo	ration Interval -	to F	eet or Open Hole	nterval	to	_Feet											
INDED DENALTY OF DED	IIIDV I UEDEDV ATTE	CTTUATTUE INICODMA	TION COI	NITAINED LIED	EIN ISTRIE AND C	ODDECT TO THE E	DEST OF MA	/ KNOW! ED/												
		Curlo mo itte	. d [] a	الموارمة الموالم																
		Submille	eu Ele	ctronically	У															
Do NOT Write in This Space - KCC USE ONLY	Date Tested:	Re	Results:		Date Plugged:	Date Repaired:	Date Put E	Back in Service):											
•									_											
Review Completed by:	_								-											
TA Approved: Yes	Denied Date:																			
		Mail to the Appr	opriate I	KCC Conserv	ration Office:															

Notes have been the top has been first hand to be to the	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.225.8888	
	KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226	Phone 316.630.4000	
	KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720	Phone 620.432.2300	
See State State See See See See See See See See See S	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550	