

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

1127895

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:				SecTwp S. R East West Feet from North / South Line of Section		
Contact Person: Phone: ()				Footages Calculated from Nearest Outside Section Corner:		
				NE NW SE SW		
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic						
Water Supply Well Other: SWD Permit #:				Lease Name: Well #:		
ENHR Permit #: Gas Storage Permit #:				Date Well Completed:		
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				The plugging proposal was approved on:(Date)		
Producing Formation(s): List All (If needed attach another sheet)				by: (KCC District Agent's Name)		
Depth to Top: Bottom: T.D						
Depth to Top: Bottom: T.D				Plugging Commenced: Plugging Completed:		
Depth to Top: Bottom: T.D				1 lugging completed.		
Show depth and thickness of	all water, oil and gas forn	nations.				
Oil, Gas or Water Records			Casing Record	(Surface, Conductor & Prod	uction)	
Formation	Content	Casing	Size	Setting Depth	Pulled Out	
					+	
cement or other plugs were us	sed, state the character of	of same depth placed from (bot	ttom), to (top) foi	each plug set.		
Plugging Contractor License #:						
Address 1:			Address 2:			
City:			State	:	Zip:+	
Phone: ()						
Name of Party Responsible fo	r Plugging Fees:					
State of County,			, ss.			
				Employee of Operator or	r 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