Form CP-111 June 2011 Form must be Typed Form must be signed

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License#									
Name:				Spot Descri	ption:				
Address 1:					Sec	Twp	S. R		<b>■</b> W
Address 2:							= :	=	
City:     State:     Zip:     +       Contact Person:     Phone:()									
				GPS Location	on: Lat:	, Long:	:(	(e.gxxx.xxxxx)	
				Datum:         NAD27         NAD83         WGS84           County:         Elevation:         GL         KB					
				Lease Name: Well #:					_
				Well Type: (	check one) 🗌 Oil 🗌	Gas OG W	/SW Oth	her:	
Field Contact Person:					ermit #:				
Field Contact Person Phone: ( )				_	rage Permit #:				
				Spud Date:		Date Shut	t-In:		
	Conductor	Surface	Pro	oduction	Intermediate	Liner	r	Tubing	
Size									
Setting Depth									
Amount of Cement									
Top of Cement									
Bottom of Cement									
Casing Squeeze(s):	to w	/ sacks of c							
Casing Squeeze(s):  (top)  To you have a valid Oil & Gas If the Case If the Ca	to w	No sacks of control sac	ement, Ca w / _	tototsing Leaks: sacks	(bottom) w /	sacks of cer h of casing leak(s):  Collar:	ment. Date:	:	
Casing Squeeze(s):  (top)  Do you have a valid Oil & Gas I  Depth and Type:  Junk in H  Type Completion:  ALT. I  Packer Type:	to w	No sacks of control sac	ement, 	tototossing Leaks: sacks	w / w / Yes  \[ \] No  \[ \text{Dept} \] S of cement  \[ \] Port	sacks of cer h of casing leak(s):  Collar: (depth) et	ment. Date:	:	
Casing Squeeze(s):  (top)  Do you have a valid Oil & Gas I  Depth and Type:  Junk in H  Type Completion:  ALT. I  Packer Type:  Total Depth:	to w	No sacks of control sac	ement, 	tototossing Leaks: sacks	w / w / Yes  \[ \] No  \[ \text{Dept} \] S of cement  \[ \] Port	sacks of cer h of casing leak(s):  Collar: (depth) et	ment. Date:	:	
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Do NOT Write in This	to w w	No No Tools in Hole at	cannot, Cannot, W / Inch	sing Leaks: sacks set at: Plug Back Methorization Interval	Completio  to for to Fellows and continuous for the continu	sacks of cer h of casing leak(s):  Collar:	w /	sack o	Feet Feet

No.   No.	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
	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550