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

## **TEMPORARY ABANDONMENT WELL APPLICATION**

All blanks must be complete

ation: Lat:  NAD27 NAD83  Eleme:  (check one) Oil Ge Permit #:  Nation: Lat:  (e.g. xx.xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	evation: Well #: as OG WSW O	E   W   S Line of Section   W Line of Section   (e.g>xxxxxxxx)   GL   KB   KB   KB   KB   KB   KB   KB   K
ation: Lat:  (e.g. XX.XXXXX) NAD27 NAD83 Eleme:  Eleme: (check one) Oil G: Permit #: torage Permit #:	Twp S. R feet from	E W S Line of Section W Line of Section (e.gxxx.xxxxx)  GL KB ther:
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ntion: Lat:  (e.g. XX.XXXXX NAD27 NAD83 Eleme:  Eleme:  (check one) Oil Gi Permit #:  torage Permit #:	, Long:, WGS84 evation: Well #: as OG WSWO ENHR Permit Date Shut-In:	(e.gxxx.xxxxx)  GL KB  ther:#:
NAD27 NAD83 Eleme:  (check one) Oil Germit #:  torage Permit #:	WGS84 evation:	GL KB
Eleme: Eleme: Oil	evation: Well #: as	ther:#:
c (check one) Oil G: Permit #: torage Permit #: e:	as OG WSW O ENHR Permit Date Shut-In:	ther: #:
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torage Permit #: e:	Date Shut-In:	
ə:	Date Shut-In:	
Intermediate	Liner	
		Tubing
ks of cement Port Co Feet thod: Completion I	llar: w /  mformation	sack of cement
I to Feet	t or Open Hole Interval _	toFeet
	DECTIONE BEST OF	MV KNOW! EDGE
Date Plugged:	Date Repaired: Date P	ut Back in Service:
	w / w / Yes  \_ No  \_ Depth of the control of the c	Completion Information  al to Feet or Open Hole Interval _  al to Feet or Open Hole Interval _  EDEIN ISTRUE AND CORRECT TO THE BEST OF

from tody trans one rate to an finish transport to the tody	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.225.8888
Name   Name	KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226	Phone 316.630.4000
1	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