

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1141260

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 #:			l API	No. 15 -		
Name:						
Address 1:					Twp S. R East	
Address 2:			l .	Feet	from North / South Line of So	
City:	State:	Zip:+		Feet	from East / West Line of Se	
Contact Person:			Foo	tages Calculated from	Nearest Outside Section Corner:	
Phone: ()				NE N	W SE SW	
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod	ic Cou	intv. —		
Water Supply Well Other: SWD Permit #:				Lease Name: Well #:		
ENHR Permit #: Gas Storage Permit #:				Date Well Completed:		
ls ACO-1 filed? Yes	No If not, is well	log attached? Yes			s approved on:	
Producing Formation(s): List A	•				(KCC District Agent's l	
Depth to	o Top: Botto	m: T.D	— Pluc	gaina Commenced:		
Depth to Top: Bottom: T.D				Plugging Completed:		
Depth to	o Top: Botto	m:T.D		599 · · · · · · · · · · · · · · ·		
Show depth and thickness of a		ations.				
Oil, Gas or Water Records			Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out	
1						
					L	
cement or other plugs were us	sed, state the character of	same depth placed from (bot	ttom), to (top) fo	or each plug set.		
Plugging Contractor License #:						
Address 1:			Address 2:			
City:			Stat	e:		
Phone: ()					·	
Phone: ()					·	
City:) Phone: () Name of Party Responsible fo	or Plugging Fees:				·	

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 the same are true and correct, so help me God.

(Print Name)