# CORRECTION #1

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

State of \_\_\_\_

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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.K.													
OPERATOR: License #:				API No. 15											
Name:				Spot Description:											
Address 1:				Sec Twp S. R East West											
Address 2:				Feet from Morth / South Line of Section											
City:				Feet from East / West Line of Section											
Contact Person:				Footages Calculated from Nearest Outside Section Corner:											
Phone: ( )				NE NW SE SW  County:  Lease Name: Well #:  Date Well Completed: (Date)  The plugging proposal was approved on: (Date)											
								Producing Formation(s): List All (If needed attach another sheet)				by:(KCC <b>District</b> Agent's Name)			
								Depth to Top: Bottom: T.D				Plugging Commenced:			
								Depth to Top: Bottom: T.D				Plugging Completed:			
								Depth to Top: Bottom: T.D							
Show depth and thickness of a	all water, oil and gas forma	ations.													
Oil, Gas or Water Records Cas			Casing	g Record (Surface, Conductor & Production)											
Formation	Content	Casing	Size		Setting Depth	Pulled Out									
Describe in detail the manner cement or other plugs were us		-		•		ods used in introducing	it into the hole. If								
Plugging Contractor License #: Name:															
Address 1: Addre				ss 2:											
City:				_ State:		Zip:	+								
Phone: ( )				_											
Name of Party Responsible for	r 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.

Employee of Operator or Operator on above-described well,

\_\_\_\_\_\_ , SS.

Submitted Electronically

(Print Name)

### **Summary of Changes**

Lease Name and Number: Franklin OW

API/Permit #: 15-037-01716-00-00

Doc ID: 1145035

Correction Number: 1

Field Name Previous Value New Value

API 15-037-01716-00-00