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

All blanks must be complete

## **TEMPORARY ABANDONMENT WELL APPLICATION**

OPERATOR: License#				API No. 15-														
Name:					ption:													
Address 1:					Sec	Twp	S. R											
Address 2:							= =	=										
City:       State:       Zip:          Contact Person:          Phone:																		
										Contact Person Email:					e:			
										Field Contact Person:				Well Type: (check one) Oil Gas OG WSW Other:				
Field Contact Person Phone: ( _	)			l	ermit #:		R Permit #:											
,	,			_	rage Permit #:		.In·											
		I I		Opud Date.		Date Onti-												
	Conductor	Surface	Pro	oduction	Intermediate	Liner		Tubing										
Size																		
Setting Depth																		
Amount of Cement																		
Top of Cement																		
Bottom of Cement																		
Casing Fluid Level from Surface Casing Squeeze(s):							nent. 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:    Geological Date:  Formation Name	to w /	sacks of ceres sacks	Can w / _ Inch Perfor	sing Leaks: sacks set at: sacks Plug Back Methor	Completion  to to Ference contact to	sacks of cement of casing leak(s):  Collar: (depth)  et  In Information  eet or Open Hole  eet or Open Hole	w/	sack of cement to Feet to Feet										
Casing Squeeze(s):  (top)  Do you have a valid Oil & Gas I  Depth and Type:  Junk in H  Type Completion:  ALT. I  Packer Type:  ALT. I  Total Depth:    Geological Date:  Formation Name  1	to w /	sacks of ceres sacks	Can w / _ Inch Perfor	sing Leaks: sacks Set at: Plug Back Methoration Interval	Completion  to to Ference contact to	sacks of cement of casing leak(s):  Collar: (depth)  et  In Information  eet or Open Hole  eet or Open Hole	w/ Interval Interval	sack of cement to Feet to Feet										
Casing Squeeze(s):  (top)  Do you have a valid Oil & Gas I  Depth and Type:  Junk in H  Type Completion:  Packer Type:  Total Depth:  Geological Date:  Formation Name  1.  2.  Do NOT Write in This  Space - KCC USE ONLY	to w /	sacks of ceres sacks	Performents:	sing Leaks: sacks Set at: Plug Back Methoration Interval	Completion  to Fee	sacks of cement of casing leak(s):  Collar: (depth)  et  In Information  eet or Open Hole  eet or Open Hole	w/ Interval Interval	to Feet										
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No.   No.	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.225.8888
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	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