June 2011 Form must be Typed Form must be signed

## TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete OPERATOR: License# \_\_\_\_\_ API No. 15-Spot Description: \_\_\_ \_ - \_\_\_ - \_\_\_ Sec. \_\_\_\_ Twp. \_\_\_\_ S. R. \_\_\_ 🗌 E 🦳 W Address 1: \_\_\_\_\_ feet from N / S Line of Section Address 2: \_\_\_\_\_ feet from E / W Line of Section \_\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_ \_ \_ \_ \_ Contact Person: \_\_\_ Datum: NAD27 NAD83 WGS84 Phone:( \_\_\_\_\_ ) \_\_ \_\_\_\_\_ Elevation: \_\_\_\_ \_\_\_\_ GL KB Lease Name: \_\_\_ Contact Person Email: \_\_\_ Well Type: (check one) Oil Gas OG WSW Other: Field Contact Person: \_\_\_ Field Contact Person Phone: ( \_\_\_\_\_ ) \_\_\_\_ Gas Storage Permit #:\_\_\_\_ Spud Date: \_\_\_ \_\_\_ Date Shut-In: \_ Tubing Conductor Surface Production Intermediate Liner Size Setting Depth Amount of Cement Top of Cement **Bottom of Cement** Casing Fluid Level from Surface:\_\_\_\_\_ \_\_\_ How Determined? \_\_\_\_ Casing Squeeze(s): \_\_\_\_\_ to \_\_\_\_ w / \_\_\_\_ sacks of cement, \_\_\_\_ to \_\_\_\_ w / \_\_\_\_ sacks of cement. Date: \_\_\_ Do you have a valid Oil & Gas Lease? Yes No Depth and Type: 

Junk in Hole at \_\_\_\_\_ Tools in Hole at \_\_\_\_ Casing Leaks: Yes No Depth of casing leak(s): \_\_\_\_\_ Type Completion: ALT. I Depth of: DV Tool: \_\_\_\_\_w / \_\_\_\_ sacks of cement Port Collar: \_\_\_\_w / \_\_\_\_ sack of cement \_\_ Size: \_\_ Packer Type: \_\_\_ \_ Inch Set at: \_\_\_ \_\_\_ Plug Back Method: \_\_\_ Total Depth: Plug Back Depth: \_\_\_ Geological Date: **Formation Name** Formation Top Formation Base Completion Information \_\_\_ At: \_\_\_\_\_ to \_\_\_\_\_ Feet Perforation Interval \_\_\_\_ \_\_\_\_to\_\_\_\_\_ Feet or Open Hole Interval \_\_\_\_\_ to \_\_\_\_\_ Feet \_\_\_\_\_ to \_\_\_\_\_ Feet Perforation Interval \_\_\_\_\_ to \_\_\_\_ Feet or Open Hole Interval \_\_\_\_ INDER DENALTY OF DED HIDV I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE DEST OF MY KNOW! EDGE Submitted Electronically Do NOT Write in This Date Tested: Results: Date Plugged: Date Repaired: Date Put Back in Service: Space - KCC USE ONLY Review Completed by: \_\_\_ TA Approved: Yes Denied Date: \_\_\_

## Mail to the Appropriate KCC Conservation Office:

