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

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

				API No. 15-						
Name:				Spot Description:						
Address 1:					Sec	Twp	S. R			
Address 2:						feet from	= =			
City: State: Fixed: Fixed:				feet from L E / L W Line of Section						
				GPS Location: Lat:, Long:, Long:						
				County: Elevation: GL KB Lease Name: Well #:						
									Field Contact Person:	
SWD Permit #: ENHR Permit #:										
	,				orage Permit #:	Date Shut-In:				
		I	I	Spud Date.		Date Shut-in.				
	Conductor	Surface	Pro	duction	Intermediate	Liner		Tubing		
Size										
Setting Depth										
Amount of Cement										
Top of Cement										
Bottom of Cement										
Casing Squeeze(s):		sacks of ce	ment,	(top) to	(bottom) w /	sacks of cemen	nt. Date:			
Depth and Type: Junk in Type Completion: ALT. Packer Type: Total Depth: Geological Date: Formation Name 1	Size: Size: Plug Ba Formation At:	Tools in Hole at	w / Inch Perfo Perfo	Set at: Plug Back Meth ration Interval	Completion to February Table AND Completion	collar:(depth) et In Information eet or Open Hole Inte	w /	_ sack of cement		
Depth and Type: Junk in Type Completion: ALT. Packer Type: Total Depth: Geological Date: Formation Name 1	h Hole at [(depth)	Tools in Hole at	w / Inch Perfo Perfo	Set at: Plug Back Meth ration Interval	Completion to February Table AND Completion	collar:	w /	_ sack of cement _ to Feet _ to Feet		
Depth and Type: Junk in Type Completion: ALT. Packer Type: Total Depth: Geological Date: Formation Name 1. June Benal Ty Of Benal Do NOT Write in This Space - KCC USE ONLY	Plug Ba Formation At: At: Date Tested:	Tools in Hole at	Perfo Perfo Perfo ed Ele	Set at: Plug Back Meth ration Interval ration Interval	Completion to February to Febr	collar:	ervalerval	_ sack of cement _ to Feet _ to Feet		
Depth and Type: Junk in Type Completion: ALT. Packer Type: Total Depth: Geological Date: Formation Name 1. Junice Benalty Of Bed	Plug Ba Formation At: At: Date Tested:	Tools in Hole at	Perfo Perfo Perfo ed Ele	Set at: Plug Back Meth ration Interval ration Interval	Completion to February to Febr	collar:	ervalerval	_ sack of cement _ to Feet _ to Feet		

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	KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720	Phone 620.432.2300
See State State See See See See See See See See See S	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550