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					
lame:				Spot Description:					
Address 1:					Sec	Twp	S. R		
Address 2:						feet from	= =		
City:       State:       Zip:       +          Contact Person:          Phone:()          Contact Person Email:				feet from L E / L W Line of Section					
				GPS Location: Lat:, Long:, Long:					
				County:   Elevation:   GL   KB   Lease Name:   Well #:					
									Field Contact Person:
Field Contact Person Phone: ( )					SWD Permit #: ENHR Permit #:				
,					Gas Storage Permit #:				
		I	ı	Spuu 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	

100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.225.8888
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