

Employee of Operator or Operator on above-described well,

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

WELL PLUGGING RECORD K.A.R. 82-3-117

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #:		API No. 1	15		
Name:		Spot Des	Spot Description: SecTwp S. R EastWest Feet from North / South Line of Section Feet from East / West Line of Section Footages Calculated from Nearest Outside Section Corner: NE NW SE SW		
		_			
		_			
		_			
		Footages			
		_			
	SWD Permit #:	Lease Na Date Wel The plug by: Plugging Plugging	ame: Il Completed: ging proposal was ap Commenced:	proved on: (Date) (KCC District Agent's Name)	
		asina Record (Sui	Record (Surface, Conductor & Production)		
Formation Content	Casing	Size	Setting Depth	Pulled Out	
Describe in detail the manner in which the well is cement or other plugs were used, state the characteristics.		•		nods used in introducing it into the hole. If	

(Print Name)

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.

_____ Address 2: ____

Submitted Electronically

____ County, _______, , ss.

Plugging Contractor License #: ______ Name: ____

Name of Party Responsible for Plugging Fees: ____