June 2011 Form must be Typed Form must be signed

All blanks must be complete

Phone 316.630.4000

Phone 620.432.2300

Phone 785.625.0550

## TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License#	OPERATOR: License#				API No. 15										
Name:				Spot Description:											
Address 1:					Sec	Twp S	. R 🗌 E 🔲 W								
Address 2:						=	N / S Line of Section								
City:            State:            Contact Person:															
								-leid Contact Person Phone:	()				age Permit #:		
												Spud Date:_		Date Shut-In: _	
									Conductor	Surface	Pr	oduction	Intermediate	Liner	Tubing
								Size							
								Setting Depth							
Amount of Cement															
Top of Cement															
Bottom of Cement															
Depth and Type:  Junk in Type Completion:  ALT. I Packer Type: Total Depth:	ALT. II Depth of	: DV Tool:(depth)	w / _	Set at:	of cement Port C	ollar: w w									
Formation Name	Formation Top Formation Base			Completion Information											
I	At:	to Feet	Perfo	oration Interval _	to Fe	et or Open Hole Inter	val toFeet								
2	At:	to Feet	Perfo	oration Interval	to Fe	et or Open Hole Inter	val toFeet								
INDED DENALTY OF BED I	IIDV I UEDEDV ATTEC	TTUATTUE INICODMA	TION CO	NITAINED LIEDE	IN ISTELLE AND CO	DDECTTOTUE DECT	FOE MV KNOW! EDGE								
		Submitt	ed Ele	ectronically											
Do NOT Write in This Space - KCC USE ONLY	Date Tested: Results:				Date Plugged:	Date Repaired: D	ate Put Back in Service:								
Review Completed by:			Comr	nents:											
TA Approved: Yes	Denied Date: _														
		Mail to the App	ropriate	KCC Conserva	ation Office:										
KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801							Phone 620.225.8888								

KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226

KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720

KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651