

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. 15			
Name:					
Address 1:		SecTwp S. R East West			
Address 2:		Feet from North / South Line of Section			
City: State	e:	Feet from East / West Line of Section			
Contact Person:		Footages Calculated from Nearest Outside Section Corner:			
Producing Formation(s): List All (If needed attach  Depth to Top:  Depth to Top:	SWD Permit #:  Sas Storage Permit #:  is well log attached?  Bottom:  T.D.  Bottom:  T.D.  Bottom:  T.D.  Bottom:  T.D.	County:  Lease Name:			
Oil, Gas or Water Records		Casing 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.		luid was placed and the method or methods used in introducing it into the hole. If om), to (top) for each plug set.			

Plugging Contractor License #:		Name:					
Address 1:		_ Address 2:					
City:			State:		_ Zip:	+	
Phone: ( )							
Name of Party Responsible for Plugging Fee	s:						
State of	County,		_ , SS.				
				Employee of Operator or	Operator on above	va-described well	

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.

(Print Name)