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-						
Name:				Spot Descri	iption:					
Address 1:					Sec	Twp	S. R	E	$\square$ W	
Address 2:										
City:	State:	Zip: +			on: Lat:				Section	
Contact Person:				Datum:	on: Lat:	WGS84	(6	e.gxxx.xxxxx)		
Phone:( )		County: Elevation: GL K								
Contact Person Email:	Lease Name:									
Field Contact Person:										
Field Contact Person Phone: ( )					SWD Permit #: ENHR Permit #:					
				_	prage Permit #:		-In:			
	Conductor	Surface	Pro	duction	Intermediate	Liner		Tubing		
Size										
Setting Depth										
Amount of Cement										
Top of Cement										
Bottom of Cement										
Casing Squeeze(s):	ease? Yes one at the sease? Yes one at the s	No Tools in Hole at	Ca th) W / _ Inch Perfo	sing Leaks: sacks Set at: Plug Back Meth	Yes No Dept s of cement Port Fe od: Completic to F	h of casing leak(s):  Collar:	w / w /	sack of (	cement	
		Date Tested: Results:							$\neg$	
Do NOT Write in This Space - KCC USE ONLY	Date Tested:	R	esults:		Date Plugged:	Date Repaired:	Date Put	Back in Servic	e: 	
		R		nents:	Date Plugged:	Date Repaired:	Date Put	Back in Servic	e: 	
Space - KCC USE ONLY  Review Completed by:				nents:	Date Plugged:	Date Repaired:	Date Put	Back in Servic	e: —	

	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	Phone 316.630.4000
The state of the s	KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720	Phone 620.432.2300
Some State S	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550