

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

the same are true and correct, so help me God.

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

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

| OPERATOR: License #:  |  |         |         | API No. 15   |                          |                           |                   |
|---|--|---------|---------|--|--------------------------|---------------------------|-------------------|
| Name:   |  |         |         | Spot Description:  |                          |                           |                   |
| Address 1:  |  |         |         | Sec Twp S. R East West                                   |                          |                           |                   |
| Address 2:  |  |         |         | Feet from North / South Line of Section                  |                          |                           |                   |
| City:   |  |         |         | Feet from East / West Line of Section                    |                          |                           |                   |
| Contact Person:   |  |         |         | Footages Calculated from Nearest Outside Section Corner: |                          |                           |                   |
| Phone: ( )  |  |         |         | □ NE □ NW □ SE □ SW                                      |                          |                           |                   |
| Type of Well: (Check one) 0  Water Supply Well 0  ENHR Permit #:  | OG D&A Cathoo SWD Permit #:  orage Permit #: | Leas    |         | County:  |                          |                           |                   |
| Is ACO-1 filed? Yes No If not, is well log attached? Yes No       |  |         |         | The plugging proposal was approved on:                   |                          |                           |                   |
| Producing Formation(s): List All (If needed attach another sheet) |  |         |         | by: (KCC <b>District</b> Agent's Name)                   |                          |                           |                   |
| Depth to Top: Bottom: T.D   |  |         |         |  |                          |                           |                   |
| Depth to Top: Bottom: T.D   |  |         |         | Plugging Commenced:                                      |                          |                           |                   |
| Depth to Top: Bottom: T.D   |  |         |         | Plugging Completed:                                      |                          |                           |                   |
|   | ·<br>  |         |         |  |                          |                           |                   |
| Show depth and thickness of                                       | all water, oil and gas form                  | ations. |         |  |                          |                           |                   |
| Oil, Gas or Water Records Casing                                  |  |         |         | Record (Surface, Conductor & Production)                 |                          |                           |                   |
| Formation   | Content                                      | Casing  |         |  | Setting Depth Pulled Out |                           |                   |
|   |  |         |         |  |                          |                           |                   |
|   |  |         |         |  |                          |                           |                   |
|   |  |         |         |  |                          |                           |                   |
|   |  |         |         |  |                          |                           |                   |
|   |  |         |         |  |                          |                           |                   |
|   |  |         |         |  |                          |                           |                   |
| Describe in detail the manner cement or other plugs were u        |  |         |         |  |                          | ous used in introducing i | Timo the note. If |
| Plugging Contractor License #:                                    |  |         | Name: _ |  |                          |                           |                   |
| Address 1: A  |  |         |         | ess 2:   |                          |                           |                   |
| City:   |  |         |         | State:   |                          | Zip:                      | +                 |
| Phone: ( )  |  |         |         | -  |                          |                           |                   |
| Name of Party Responsible for                                     | or Plugging Fees:                            |         |         |  |                          |                           |                   |
| State of  | County,                                      |         |         | SS.  |                          |                           |                   |
|   |  |         |         |  |                          |                           | - 4 2 2 2         |
|   | (Print Name)                                 |         |         | Em   | nployee of Operator or   | Operator on above         | 3-uescribed well, |

Submitted Electronically

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