

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

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

60 days from plugging date.	WELL PLUGGING K.A.R. 82-3-11		Form must be Signed All blanks must be Filled		
OPERATOR: License #:		API No. 15			
Show depth and thickness of all water, oil and gas formation Oil, Gas or Water Records Formation Content		ng Record (Surface, Conductor & Productor & Setting Depth	duction) Pulled Out		

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Plugging Contractor License #:		_ Name: _						
Address 1:		_ Address	ess 2:					
City:			State:		_ Zip:	+		
Phone: ()								
Name of Party Responsible for Plugging Fe	es:							
State of	County,		_ , SS.					
	D. (()		Employee of	Operator or	Operator on a	bove-described	d 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.