

**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

## 1276587

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 Footages Calculated from Nearest Outside Section Corner:			
							Phone: ( )
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic  Water Supply Well Other: SWD Permit #:  ENHR Permit #: Gas Storage Permit #:  Is ACO-1 filed? Yes No If not, is well log attached? Yes No  Producing Formation(s): List All (If needed attach another sheet)  Depth to Top: Bottom: T.D.				County: Well #: Well #: The plugging proposal was approved on: (KCC District Agent's Name)  Plugging Commenced:			
Depth to Top: Bottom: T.D				Plugging Completed:			
Depth to	Top: Botto	m: T.D					
Show depth and thickness of a	all water, oil and gas forma	ations.					
Oil, Gas or Water Records			Casing Record (Surface, Conductor & Production)				
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
Describe in detail the manner cement or other plugs were us		-	•			ds used in introducing it into the hole. If	
Plugging Contractor License #:							
Address 1: Addres							
City:			S	tate:		Zip:+	
Phone: ( )							
Name of Party Responsible for	r Plugging Fees:						
State of	County, _		,	SS.			
	· ·	,			mployee of Operator or	Operator on above-described well,	
(Print Name)				=	inployee of Operator of	Operator on above-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.