

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

1356244

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									
							Feet from North / South Line of Section						
							Feet from East / West Line of Section Footages Calculated from Nearest Outside Section Corner: NE NW SE SW						
				Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathod				ic	ounty:		
				Water Supply Well Other:						Lease Name: Well #: Date Well Completed:			
								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: Botto	m: T.D											
Depth to Top: Bottom: T.D.				Plugging Commenced: Plugging Completed:									
Depth to	Top: Botto	m: T.D	「	lugging	Completed								
Chave don'th and thiskness of		-4i											
Show depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing				Record (Surface, Conductor & Production)									
Formation Content		Casing Size		Setting Depth Pulled Out									
Formation	Content	Casing	Size		Setting Deptin	Fulled Out							
cement or other plugs were us						ds used in introducing it into the hole. I							
Plugging Contractor License #:				ne:									
Address 1:			Address 2:										
City:			s	tate:		Zip:++							
Phone: ()													
Name of Party Responsible fo	or Plugging Fees:												
State of County,				SS.									
				En	nployee of Operator or	Operator on above-described 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