

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

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 RECORD
K.A.R. 82-3-117

OPERATOR: License #: ______ | API No. 15 - ____

Address 1:					Sec	Twp S. R	East West
Address 2:					Feet from	North /	South Line of Section
City:	State:	Zip:+ _			Feet from	n East /	West Line of Section
Contact Person:				Footages Calculated from Nearest Outside Section Corner:			
Phone: ()				□ NE □ NW □ SE □ SW			
Type of Well: (Check one)	Oil Well Gas We	ell OG D&A Ca	athodic	County:			
Water Supply Well Other: SWD Permit #:				Lease Name: Well #:			
ENHR Permit #: Gas Storage Permit #:				Date Well Completed: (Date) The plugging proposal was approved on: (Date)			
Is ACO-1 filed? Yes No If not, is well log attached? Yes No							
Producing Formation(s): List	,	,		by:		(KC	CC District Agent's Name,
Depth to Top: Bottom: T.D				Plugging Commenced:			
Depth t	to Top:	Bottom: T.D		Plugging Completed:			
Depth t	to Top:	Bottom:T.D		00 0	·		
Show depth and thickness of		formations.					
Oil, Gas or Water Records					Record (Surface, Conductor & Production)		
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
Describe in detail the manne	er in which the well is	plugged, indicating where the	e mud fluid was	placed and	d the method or meth	ods used in introc	ducing it into the hole. It
cement or other plugs were u	used, state the charac	eter of same depth placed from	n (bottom), to (t	op) for eac	h plug set.		
cement or other plugs were u	used, state the charac	eter of same depth placed from	n (bottom), to (t	op) for eac	h plug set.		
cement or other plugs were u	used, state the charac	eter of same depth placed from	n (bottom), to (t	op) for eac	h plug set.		
Plugging Contractor License	used, state the charac	eter of same depth placed from	Name:Address	op) for eac	h plug set.		
Plugging Contractor License Address 1:	#:	eter of same depth placed from	Name:Address	op) for eac	h plug set.		
Plugging Contractor License Address 1: City:)	#:	eter of same depth placed from	Name: Address	op) for eac	h plug set.	Zip:	
Plugging Contractor License Address 1: City: Phone: () Name of Party Responsible for	#: or Plugging Fees:	eter of same depth placed from	Name:Address	op) for eac	h plug set.	Zip:	