

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

1362876

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 Feet from North / South Line of Section				
								City:
Contact Person:				Footages Calculated from Nearest Outside Section Corner: NE NW SE SW				
								County:
				Water Supply Well C		Lease Name: Well #:		
ENHR Permit #: Gas Storage Permit #:				Date Well Completed:				
Is ACO-1 filed? Yes No If not, is well log attached? Yes				The plugging proposal was approved on:				
Producing Formation(s): List All (If needed attach another sheet)				by:(KCC District Agent's Name)				
Depth to	Top: Botto	m: T.D						
Depth to	m: T.D							
Depth to	m:T.D	Plug	iging Com	pietea:				
Show depth and thickness of a	all water, oil and gas forma	ations.						
Oil, Gas or Water		Casing Record (Surface, Conductor & Production)						
Formation	Content	Casing	Size	S	etting Depth	Pulled Out		
cement or other plugs were us	sed, state the character of	same depth placed from (bot	ttom), to (top) fo	r each plu	g set.			
Plugging Contractor License #:								
Address 1:			Address 2:					
City:		e:		Zip:	_+			
Phone: ()								
Name of Party Responsible fo	r Plugging Fees:							
State of County,			, SS.					
				Employ	ee 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