

**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

1363432

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 -         Spot Description:          SecTwp S. REastWest         Feet from North / South Line of Section									
							City:				Feet from East / West Line of Section		
							Contact Person:				Footages Calculated from Nearest Outside Section Corner:  NE NW SE SW  County:  Lease Name: Well #:		
ENHR Permit #: Gas Storage Permit #:													
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				Date Well Completed:									
Producing Formation(s): List All (If needed attach another sheet)				by: (KCC <b>District</b> Agent's Name)									
Depth to		om: T.D		•		· · · · · · · ·							
Depth to Top: Bottom: T.D				Plugging Commenced:									
Depth to Top: Bottom:T.D				Plugging Completed:									
•	•												
Show depth and thickness of	all water, oil and gas form	ations.	•										
Oil, Gas or Water Records Casing			Casing F	Record (Surface, Conductor & Production)									
Formation	Content	Casing	Size		Setting Depth	Pulled Out							
cement or other plugs were us		•		•		ods used in introducing it into the hole.							
Plugging Contractor License #:			Name: _	ə:									
Address 1:			Address	2:									
City:				State:									
Phone: ( )				-									
Name of Party Responsible for	or Plugging Fees:												
State of	County,			, SS.									
				Fm	plovee of Operator o	r Operator on above-described well							
	(Print Name)				piogod or operator o	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.