

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

1364890

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:				SecTwp S. R EastWest Feet from North / South 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 Well OG D&A Cathodic				otv:		
Water Supply Well Other: SWD Permit #:				Lease Name: Well #:		
ENHR Permit #: Gas Storage Permit #:				Date Well Completed:		
Is ACO-1 filed? Yes No If not, is well log attached? Yes N				The plugging proposal was approved on: (Date)		
Producing Formation(s): List All (If needed attach another sheet)				by:(KCC District Agent's Name)		
Depth to Top: Bottom: T.D				Plugging Commenced:		
Depth to Top: Bottom: T.D.			I	Plugging Commenced: Plugging Completed:		
Depth to	Top: Botto	m:T.D	Flug	- Flugging Completed		
Show depth and thickness of a	all water, oil and gas forma	ations.				
Oil, Gas or Water Records		Casing Record	Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out	
cement or other plugs were us	ed, state the character of	same depth placed from (bot	ttom), to (top) fo	r each plug set.		
Plugging Contractor License #:			Name:			
Address 1:			Address 2:			
City:			State	e:		
Phone: ()						
Name of Party Responsible for	r Plugging Fees:					
State of	County, _		, ss.			
			Employee of Operator of	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