

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

SOION 100001

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 #:			AF	API No. 15									
Name:				Spot Description:									
							Water Supply Well Other: SWD Permit #:						
							ENHR Permit #: Gas Storage Permit #:				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: Bottom: T.D.					·	roved on: (Date)
											by: (KCC District Agent's Name)		
			I Pli				I Plugging Completed:						
Dopur to	лор. <u> </u>	i.b											
Show depth and thickness of	all water, oil and gas form	ations	•										
			Casing Paca	rd (Su	urfaco Conductor & Produ	uction)							
Oil, Gas or Water Records		Casing	Casing Record (Surface, Conductor & Production) Size Setting Depth Pulled Out										
Formation	Content	Casing	Size		Setting Depth	Pulled Out							
Describe in detail the manner cement or other plugs were us						ods used in introducing it into the hole. If							
Plugging Contractor License #:													
Address 1:													
City:			Sta	ate:		Zip:+							
Phone: ()													
Name of Party Responsible for	r Plugging Fees:												
State of	County,		, \$	SS.									
				Er	mployee of Operator or	Operator on above-described well,							
	(Print Name)												

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