KOLAR Document ID: 1581000

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

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

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #:				API No. 15			
Name:				Spot Description:			
Address 1:				Sec Twp S. R East West			
Address 2:				Feet from North / South Line of Section Feet from East / West Line of Section			
City: State: Zip: +							
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 Water Supply Well Other: SWD Permit #:				County: Well #:			
ENHR Permit #: Gas Storage Permit #:				Date Well Completed:			
Is ACO-1 filed?				The plugging proposal was approved on: (Date)			
Producing Formation(s): List All (If needed attach another sheet)				by: (KCC District Agent's Name) Plugging Commenced:			
Depth to Top: Bottom: T.D							
Depth to Top: Bottom: T.D				Plugging Completed:			
Depth to	Top: Botto	m: T.D					
Show depth and thickness of a	all water, oil and gas forma	ations.	<u> </u>				
Oil, Gas or Water Records			Casing Reco	sing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size		Setting Depth	Pulled Out	
Describe in detail the manner cement or other plugs were us						ds used in introducing it into the hole. If	
Plugging Contractor License #: Na			Name:				
Address 1:			Address 2:				
City:			Sta	te:		Zip:+	
Phone: ()							
Name of Party Responsible fo	r Plugging Fees:						
State of County,				S.			
			Em	nployee of Operator or	Operator on above-described well,		
	(Print Name)						

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.