KOLAR Document ID: 1668058

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 #:			I API	No. 15 -		
Name:				Spot Description:		
Address 1:					Гwp S. R East West	
Address 2:				Feet from		
City:	State:	Zip:+		Feet from		
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 #: ENHR Permit #: Gas Storage Permit #:				County:		
Is ACO-1 filed? Yes No If not, is well log attached? Yes No				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	Тор: Во	ttom: T.D	— `			
Show depth and thickness of a	all water, oil and gas for	mations				
			Casing Record	g Record (Surface, Conductor & Production)		
Formation	Content	Casing	Size	Setting Depth	Pulled Out	
		, ,		0 1		
	•	gged, indicating where the muc of same depth placed from (bo			ods used in introducing it into the hole. If	
Plugging Contractor License #:			Name:	e:		
Address 1: Addres						
City:			State	e:		
Phone: ()						
Name of Party Responsible fo	r Plugging Fees:					
State of County,			, SS.			
(Print Name)				Employee of Operator or	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.