KOLAR Document ID: 1727677

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 #:			l APINo	o 15 -				
OPERATOR: License #: Name:				Spot Description:				
Address 1:Address 2:				Sec Twp S. R East West Feet from North / South Line of Section				
		·		Footages Calculated from Nearest Outside Section Corner:				
Phone: ()				NE NW	SE SW			
Type of Well: (Check one) (1) Water Supply Well (2) ENHR Permit #: Is ACO-1 filed? Yes (2) Producing Formation(s): List to the production of the product	Other: Gas S	Storage Permit #:	Lease Date W The plu	County: Well #: Date Well Completed: (Date) by: (KCC District Agent's Name) Plugging Commenced:				
Depth to Top: Bottom: T.D				Plugging Commerced:				
Depth to	о Тор: Во	ottom:T.D		ig Completed				
Show depth and thickness of	all water, oil and gas for	mations.						
Oil, Gas or Water Records			Casing Record (Surface, Conductor & Production)					
Formation	Content	Casing	Size	Setting Depth	Pulled Out			
	•	agged, indicating where the mu of same depth placed from (b	•		ds used in introducing it into the hole. If			
			ə:					
Address 1: Addre				s 2:				
City:			State: _		Zip:+			
Phone: ()								
Name of Party Responsible for	or Plugging Fees:							
State of County,		у,	, 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.

Kathy Svitak

From:

ksvitak55 < ksvitak55@gmail.com>

Sent:

Monday, June 12, 2023 5:25 PM

To:

rsvitak@tctelco.net

Subject: Randon

Sent from my Verizon, Samsung Galaxy smartphone

5845

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Concrete

Cay County of Joh

Mariba County

Date

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	API Well Number:					
Kansas Corporation Commission	Spot:	Sec	Twp	S Rng_	E/ W	
ixansas corporation commission			Feet fr	om N/	S Line of Section	
District Plugging Report				om E/	W Line of Section	
00 0 1	GPS: Lat:					
	Lease Name:			Well #:		
	County:					
Operator License No:	String	Size	Depth 1	Pulled	Comments	
Op Name:			-			
Address 1:						
Address 2:						
City:						
State: Zip Code:						
Well Type:	UIC Docket No.:		Date/Time to	o Plug:	/	
Plug Co License No.:	Plug Co. Name:					
Proposal Rcvd from:	Company Name:	Phone:			ne:	
Proposed						
Plugging						
Report:						
Discoine Descriped Descriped Descriped		13 724	F 0.			
Plugging Proposal Received By:			1 ype:			
Actual Plugging Report:	KCC Agent:	Perfs:	Ton	Dottom	Thus	
Actual Flugging Report:		rens:	Тор	Bottom	Thru	
Dames de la Constantina del Constantina de la Co						
Remarks						
Plugged Thru:		Plu	gged Due to	Compliance I	ssue: Yes No	
District:						
			(Technicia			
		F	orm: District	Plugging Repo	ort –	