KOLAR Document ID: 1791961

**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 #:			1	API No. 1	15	
Name:				Spot Description:		
Address 1:				Sec Twp S. R East West		
					Feet from	North / South Line of Section
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 #:  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.  Depth to Top: Bottom: T.D.				County:  Lease Name: Well #:  Date Well Completed: (Date)  by: (KCC District Agent's Name)  Plugging Commenced:  Plugging Completed:		
Dept	h to Top:	Bottom:T.D				
Show depth and thickness of all water, oil and gas formations.						
Oil, Gas or Water Records				Record (Surface, Conductor & Production)		
Formation	Content	Casing	Size		Setting Depth	Pulled Out
		olugged, indicating where the mater of same depth placed from (b				ds used in introducing it into the hole. If
Plugging Contractor License #: I						
Address 1: Address 1:				:		
City:				State:		Zip:+
Phone: ( )						
Name of Party Responsible	e for Plugging Fees:					
State of County,				, SS.		
				Fn	mployee of Operator or	Operator on above-described well,
-	(Print No.	mal			p.s,cc or operator or	Sporator on above accombed 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.