KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

VERIFIED AFFIDAVIT FOR VACUUM OPERATIONS

Form V-1
September 2003
Form must be Typed
Form must be Signed
Submit in Duplicate

Operator Name:		KCC License Number:
Operator Address:		
Contact Person:		Phone:
Lease Name & Number:	API Number: **15 -**	KCC Lease Code No.
Gas Pipeline Transporter:	KS Department of Revenue *(KDOR)* Lease Code Number:	

Location:
Spot Location (QQQQ) Section Township Range _____ Feet from ☐ North / ☐ South Line of Section

_____ - _____ - _____ - _____ _____ _____ _____ ☐ East ☐ West _____ Feet from ☐ East / ☐ West Line of Section

County:	Field Name:	Producing Formation Group:
Effective Date of Vacuum Implementation:	Date of Last Well Test:	If the test date is within 120 days prior to the date of this Affidavit, is a copy of the test attached? ☐ Yes ☐ No

Affidavit Certificate of Service

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with the statements here are complete and correct to the best of my knowledge. The well subscribed to in this Affidavit will be produced in accordance with the terms of the applicable basic proration order. I hereby certify that I caused a true and correct copy of the foregoing Affidavit and any attachments of said Affidavit to be served by placing the same in the United States mail, postage paid, to the following parties: *(attach supplement sheet if necessary)*

Name	*Address*

Signature: _____ Date: _____

Title: _____

Subscribed and sworn to before me this _____ day _____ , of _____

Notary Public: _____

Date Commission Expires: _____

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202