Form CP-111 March 2009 Form must be Typed Form must be signed

Phone 620.432.2300

Phone 785.625.0550

Phone 316.734.4933

All blanks must be complete

| TEMPORARY | ABANDONMENT | WELL | APPL | ICATION |
|------------------|--------------------|------|-------------|---------|
|------------------|--------------------|------|-------------|---------|

| OPERATOR: License# | | | | API No. 15 | | | | | | |
|---------------------------------|--------------|---|-----------|--|-------------------|---------------|-------------------|-------------|--------------------|--------|
| | | | | Spot Description: | | | | | | |
| Address 1: | | | | | | | Гwр S. | | | |
| Address 2: | | | | | | | feet from | | | |
| City: | | | | feet from E / W Line of Section | | | | | | |
| Contact Person: | | | | GPS Location: Lat:, Long: | | | | | | |
| Phone:() Contact Person Email: | | | | Lease Name: V | | | | Well #: | | |
| | | | | Floresting | | | | | | |
| Field Contact Person: | | | | Well Type: (check one) Oil Gas OG WSW Other: ENHR Permit #: ENHR Permit #: | | | | | | |
| Field Contact Person Phone: (| | | | | | | | | | |
| riola contact refeel rifene. | , | | | Gas Storage Permit #: Date Shut-In: | | | | | | |
| | | | | Spud Date:_ | | | Date Shut-In: | | | |
| | Conductor | Surface | Pr | oduction | Intermedia | te | Liner | | Tubing | |
| Size | | | | | | | | | | |
| Setting Depth | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | |
| Top of Cement | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | |
| Cooing Fluid Lovel | Ш | ow Datarminad? | | | | D | oto | | | |
| Casing Fluid Level: | | | | | | | | | | |
| Casing Squeeze(s): | (bottom) | Sacks of ce | | (top) (top) | bottom) | 30 | acks of cernefit. | Date | | |
| Do you have a valid Oil & Gas | Lease? Yes |] No | | | | | | | | |
| Depth and Type: Junk in | Hole at | Tools in Hole at | Ca | asing Leaks: | Yes No [| Depth of casi | ng leak(s): | | | |
| Type Completion: ALT. I | | | | | | | | | | cement |
| Packer Type: | | | | | | | (аерт) | | | |
| Total Depth: | Plug Bac | k Depth: | | Plug Back Metho | d: | | | | | |
| Geological Data: | | | | | | | | | | |
| Formation Name | Formation - | Top Formation Base | | | Comp | letion Inform | ation | | | |
| 1 | | to Feet | Porfo | oration Interval _ | | | | ادر | to | Foot |
| 2 | Λ+- | to Feet to Feet | | oration Interval _ | | | Open Hole Interv | | _ to | Feet |
| Z | At | 10 Feet | renc | nation interval _ | 10 | Feet Of (| open note interv | aı | _ 10 | |
| | | | | | | | | | | |
| | | Submitt | ed Fle | ctronically | , | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Do NOT Write in This | Date Tested: | R | esults: | | Date Plugge | d: Date | Repaired: Da | ate Put Bac | k in Servi | ice: |
| Space - KCC USE ONLY | | | | | | | | | | |
| Review Completed by: | | | Comr | nents: | | | TA Appro | oved: Yes | Deni | |
| Traview Completed by. | | | Coilii | | | | IA Applo | ,vou. 100 | | |
| | | Moil to the Arra | roprioto | KCC Canaarii | ation Office: | | | | | |
| | | Mail to the App | | | | | | | | |
| | -(| KCC District Office #1 - 210 E. Frontview, Suit | | | | | | | Phone 620.225.8888 | |
| 4> | KCC Distri | ct Office #2 - 3450 N. Ro | ock Road, | Building 600, Su | ııte 601, Wichita | , KS 67226 | | Phone | 316.630 |).4000 |

KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720

Underground Porosity Gas Storage (UPGS) 8200 E. 34th Street Circle N., Suite 1003, Wichita, KS 67226

KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651