



TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

OPERATOR: License# _____
Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Contact Person: _____
Phone: (_____) _____
Contact Person Email: _____
Field Contact Person: _____
Field Contact Person Phone: (_____) _____

API No. 15- _____
Spot Description: _____
_____ Sec. _____ Twp. _____ S. R. _____ E W
_____ feet from N / S Line of Section
_____ feet from E / W Line of Section
GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)
County: _____
Lease Name: _____ Well #: _____
Elevation: _____ GL KB
Well Type: (check one) Oil Gas OG WSW Other: _____
 SWD Permit #: _____ ENHR Permit #: _____
 Gas Storage Permit #: _____
Spud Date: _____ Date Shut-In: _____

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size						
Setting Depth						
Amount of Cement						
Top of Cement						
Bottom of Cement						

Casing Fluid Level: _____ How Determined? _____ Date: _____
Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
(top) (bottom) (top) (bottom)
Do you have a valid Oil & Gas Lease? Yes No
Depth and Type: Junk in Hole at _____ Tools in Hole at _____ Casing Leaks: Yes No Depth of casing leak(s): _____
(depth) (depth)
Type Completion: ALT. I ALT. II Depth of: DV Tool: _____ w / _____ sacks of cement Port Collar: _____ w / _____ sack of cement
(depth) (depth)
Packer Type: _____ Size: _____ Inch Set at: _____ Feet
Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name	Formation Top	Formation Base	Completion Information
1. _____	At: _____	to _____ Feet	Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet
2. _____	At: _____	to _____ Feet	Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

Submitted Electronically

Do NOT Write in This Space - KCC USE ONLY

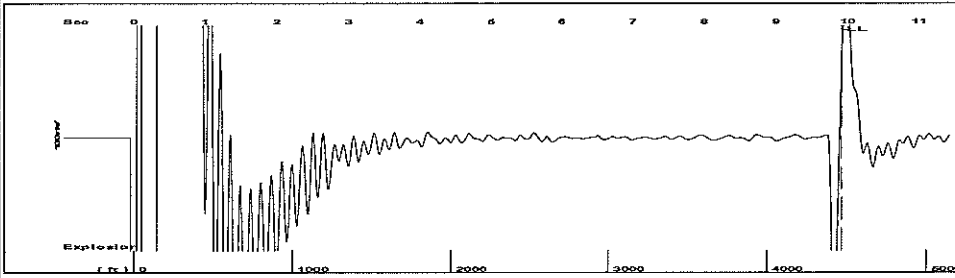
Date Tested: _____ Results: _____ Date Plugged: _____ Date Repaired: _____ Date Put Back in Service: _____

Review Completed by: _____ Comments: _____ TA Approved: Yes Denied

Mail to the Appropriate KCC Conservation Office:

	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.225.8888
	KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226	Phone 316.630.4000
	KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720	Phone 620.432.2300
	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550
	Underground Porosity Gas Storage (UPGS) 8200 E. 34th Street Circle N., Suite 1003, Wichita, KS 67226	Phone 316.734.4933

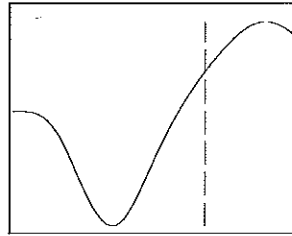
Group: MyWells Well: black 6-3 (acquired on: 08/23/11 15:17:07)



CSG only in this well.

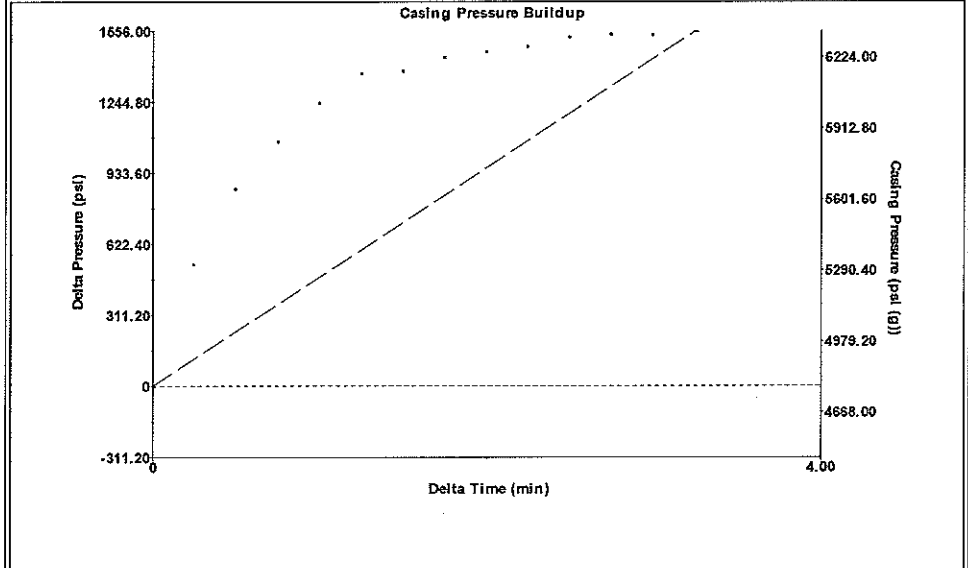
Time 9.916 sec
 Joints 140.92 Jts
 Depth 4467.16 ft

* Liquid level calculated with user supplied Acoustic Velocity
 Acoustic Velocity 901 ft/s



Analysis Method: Acoustic Velocity

Group: MyWells Well: black 6-3 (acquired on: 08/23/11 15:17:07)



Change in Pressure 1555.26 psi PT 6147
 Change in Time 3.25 min Range 0 - ? psi

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Production Current Potential
 Oil - * - - * - BBL/D
 Water - * - - * - BBL/D
 Gas - * - - * - Mscf/D

JPR Method Vogel
 PBHP/SBHP - * -
 Production Efficiency 0.0

Oil 40 deg.API
 Water 1.05 Sp.Gr.H2O
 Gas 0.70 Sp.Gr.AIR

Acoustic Velocity 901 ft/s

Formation Submergence
 Total Gaseous Liquid Column HT (TVD) 907 ft
 Equivalent Gas Free Liquid HT (TVD) 170 ft

Acoustic Test

Casing Pressure 4782.7 psi (g)
 Casing Pressure Buildup 1555.3 psi
 3.25 min
 Gas/Liquid Interface Pressure 5338.3 psi (g)
 Liquid Level Depth 4467.16 ft
 Pump Intake Depth 5374.00 ft
 Formation Depth 5374.00 ft



Producing
 Annular Gas Flow 21802 Mscf/D
 % Liquid 19 %

Pump Intake 5373.0 psi (g)
 Producing BHP 5373.0 psi (g)
 Static BHP - * - psi (g)

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Entered Acoustic Velocity for Liquid Level depth determination