Form CP-111 June 2011 Form must be Typed Form must be signed

## TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

| OPERATOR: License#                          |                        |                    |               | API No. 15-                                       |                     |                       |                        |         |  |
|---|------------------------|--------------------|---------------|---|---------------------|-----------------------|------------------------|---------|--|
| Name:                                       |                        |                    |               | Spot Description:                                 |                     |                       |                        |         |  |
| Address 1:                                  |                        |                    |               |   | Sec                 | Twp S                 | 3. R 🗌 E               | Ē       |  |
| Address 2:                                  |                        |                    |               |   |                     | feet from             |                        |         |  |
| City:                                       | State:                 | Zip: +             |               |   |                     | feet from             |                        | Section |  |
| Contact Person:                             |                        |                    |               | GPS Location: Lat:, Long:                         |                     |                       |                        |         |  |
| Phone:( )                                   |                        |                    |               |   |                     | Elevation:            |                        | ∏ KB    |  |
| Contact Person Email:                       |                        |                    |               |   | Lease Name: Well #: |                       |                        |         |  |
| Field Contact Person:                       |                        |                    |               | Well Type: (check one)  Oil  Gas  OG  WSW  Other: |                     |                       |                        |         |  |
| Field Contact Person Phor                   | ne:( )                 |                    |               | l   |                     | ENHR P                | ərmit #:               |         |  |
|   | ,                      |                    |               | _   | orage Permit #:     | Date Shut-In: .       |                        |         |  |
|   | Conductor              | Surface            | Pro           | oduction  | Intermediate        | Liner                 | Tubing                 |         |  |
| Size  |                        |                    |               |   |                     |                       |                        |         |  |
| Setting Depth                               |                        |                    |               |   |                     |                       |                        |         |  |
| Amount of Cement                            |                        |                    |               |   |                     |                       |                        |         |  |
| Top of Cement                               |                        |                    |               |   |                     |                       |                        |         |  |
| Bottom of Cement                            |                        |                    |               |   |                     |                       |                        |         |  |
| Depth and Type:                             | T. I ALT. II Depth o   | f: DV Tool:(depth  | w / _<br>Inch | Set at:   | s of cement Port (  | Collar:v<br>vt        |                        | cement  |  |
| Geological Date: Formation Name             | Formation              | Top Formation Base |               |   | Completion          | n Information         |                        |         |  |
| 1   |                        | •                  | t Perfo       | ration Interval                                   | ·                   | eet or Open Hole Inte | rval to                | Foot    |  |
| 2   |                        | to Fee             |               |   |                     | eet or Open Hole Inte |                        |         |  |
| IINDED DENALTY OF DE                        | D IIIDV I LIEDEDV ATTE |                    |               | ctronically                                       |                     | OBBECT TO THE BEC     | T OE MV IZMOMILEI      | DOE     |  |
| Do NOT Write in This<br>Space - KCC USE ONL | Date Tested:           | Results:           |               |   | Date Plugged:       | Date Repaired: [      | Date Put Back in Servi | ce:     |  |
| Review Completed by:                        |                        |                    | Comn          | nents:  |                     |                       |                        |         |  |
| TA Approved: Yes                            | Denied Date:           |                    |               |   |                     |                       |                        |         |  |
|   |                        | Mail to the Ap     | propriate     | KCC Conserv                                       | vation Office:      |                       |                        |         |  |
|   |                        |                    |               |   |                     |                       |                        |         |  |

| NAME AND DOOR DAY DOOR DAY DOOR DAYS DAYS WARE WARE THE PARTY DAYS   | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801                      | Phone 620.225.8888 |
|--|---|--------------------|
| 1000   1000   1000   1   | KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.630.4000 |
| The control of the co | KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720                             | Phone 620.432.2300 |
| Similar Street S | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                             | Phone 785.625.0550 |

Conservation Division District Office No. 4 2301 E. 13th Street Hays, KS 67601-2651



Phone: 785-625-0550 Fax: 785-625-0564 http://kcc.ks.gov/

Sam Brownback, Governor

Mark Sievers, Chairman Ward Loyd, Commissioner Thomas E. Wright, Commissioner

April 24, 2012

Jeremiah J. Burton Hewitt Energy Group, Inc. 15 W S TEMPLE STE 1050 SALT LAKE CITY, UT 84101-1503

Re: Temporary Abandonment API 15-167-02028-00-00 ERLICH 5 NW/4 Sec.31-13S-14W Russell County, Kansas

Dear Jeremiah J. Burton:

Your application for Temporary Abandonment (TA) of the above-listed well is denied for the following reasons(s):

## **HGFLD** - High fluid level

In accordance with K.A.R. 82-3-111, this well must be plugged or returned to service by May 24, 2012.

Sincerely,

Richard Williams