



TEMPORARY ABANDONMENT WELL APPLICATION

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: _____
 County: _____ (e.g. xx.xxxxx) (e.g. -xxx.xxxxx)
 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 _____ (depth) Tools in Hole at _____ (depth) Casing Leaks: Yes No Depth of casing leak(s): _____
 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:

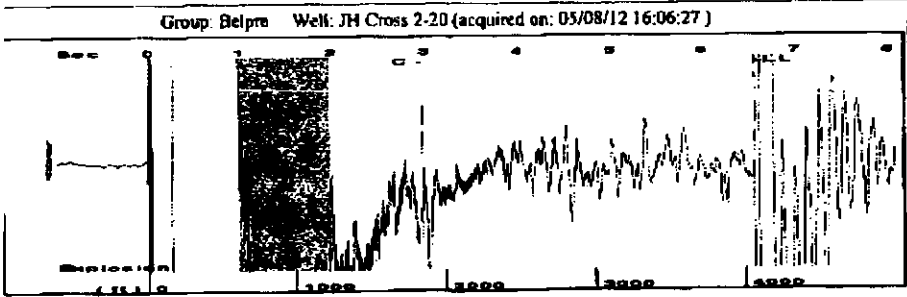
Formation Name	Formation Top	Formation Base	Completion Information
1. _____	At: _____	to _____ Feet	Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet
2. _____	At: _____	to _____ Feet	Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

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 <input type="checkbox"/> Denied <input type="checkbox"/>		

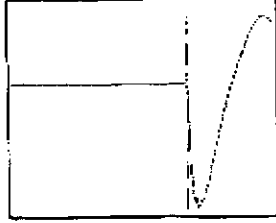
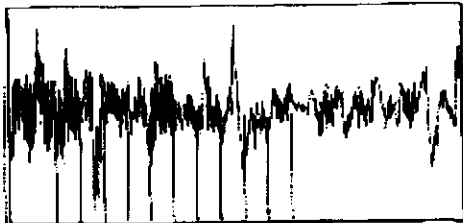
Mail to the Appropriate KCC Conservation Office:

	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

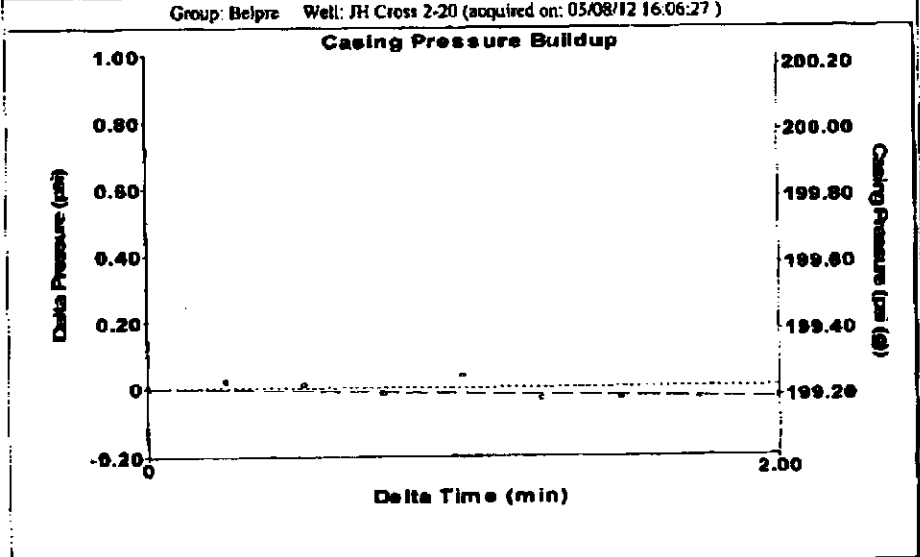


Filter Type: High Pass
 Manual Acoustic Velo: 1209.92 ft/s
 Automatic Collar Count: Yes
 Manual JTS/sec: 19.084
 Time: 6.562 sec
 Joints: 128.327 Jts
 Depth: 4067.95 ft

[1.0 to 2.0 (Sec)]

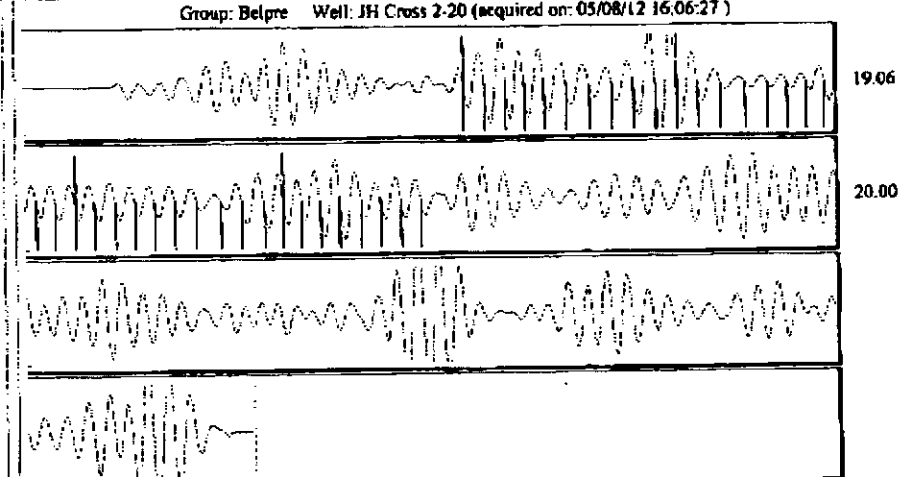


Analysis Method: Automatic



Change in Pressure: -0.03 psi
 Change in Time: 2.00 min
 PT8493
 Range: 0-2 psi

Production		Potential		Casing Pressure		Producing	
Oil	0.0	0.0	BBL/D	199.2	psi (g)	Annular Gas Flow	0.0 Msc/D
Water	0.0	0.0	BBL/D	-0.034	psi	% Liquid	100 %
Gas	0.0	0.0	Msc/D	2.00	min		
IPR Method	Vogel	Gas/Liquid Interface Pressure	222.6	psi (g)			
PBHP/SOHP	0.0	Liquid Level Depth	4067.95	ft			
Production Efficiency	0.0	Pump Intake Depth	0.0	ft			
Oil	40 deg API	Formation Depth	4410.00	ft			
Water	1.05 Sp.Gr.H2O						
Gas	0.74 Sp.Gr.AIR						
Acoustic Velocity	1239.85 ft/s						
Formation Submergence		Total Gaseous Liquid Column HT (TVD)	342	ft			
		Equivalent Gas Free Liquid HT (TVD)	342	ft			
Acoustic Test							



Acoustic Velocity: 1239.85 ft/s
 Joints Per Second: 19.556 jts/sec
 Depth to liquid level: 4067.95 ft
 Automatic Collar Count: Yes
 Joints counted: 37
 Joints to liquid level: 128.327
 Filter Width: 17.084
 Time to 1st Collar: 1.088
 21.084
 2.98