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

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

| DPERATOR: License# | | API No. 15- | | | | | | | | | | | | | | | | | | |
|--|--|---------------------|-------------|---------------------------------------|--|--|--------|---------|----------|--------------------------------|-----------|---------|----|----------|--|-------|--|--------|--|--|
| lame: | | | | Spot Description: | | | | | | | | | | | | | | | | |
| Address 1: | | | | | Sec | Twp | _ S. R | [| E W | | | | | | | | | | | |
| Address 2: | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | ield Contact Person: | | | | | | | | | | |
| | | | | | | | | | | ield Contact Person Phone: () | | | | | SWD Permit #: ENHR Permit #: Gas Storage Permit #: Date Shut-In: | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | Conductor | Surface | Pr | oduction | Intermediate | Liner | | Tubing | | |
| Size | | | | | | | | | | | | | | | | | | | | |
| Setting Depth | | | | | | | | | | | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | | | | | | | | | | | |
| Top of Cement | | | | | | | | | | | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | | | | | | | | | | | |
| Casing Squeeze(s): (top) To you have a valid Oil & Gar Depth and Type: Junk in Type Completion: ALT. Packer Type: Cotal Depth: Cormation Name Cormation Name | as Lease? Yes n Hole at (depth) I ALT. II Depth of Size: Plug Back Formation At: At: | No Tools in Hole at | epth) Ca | sasing Leaks: sacks set at: sack Meth | Yes No Depth s of cement Port C Fee od: Completion to Fe to Fe | of casing leak(s): Collar: | w / | sack of | f cement | | | | | | | | | | | |
| | | | | • | | | | | | | | | | | | | | | | |
| Do NOT Write in This Space - KCC USE ONLY | Date Tested: Results: | | Results: | | Date Plugged: | Date Repaired: Date Put Back in Service: | | | | | | | | | | | | | | |
| Review Completed by: | | | Comr | ments: | | | | | | | | | | | | | | | | |
| TA Approved: Yes | Denied Date: | | | | | | | | | | | | | | | | | | | |
| | | Mail to the Ap | nronriate | KCC Conserv | ration Office | | | | | | | | | | | | | | | |
| | | | - p p. 14.0 | | | | | | | | | | | | | | | | | |

| Notes to the last not not to be not been some for the last | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | Phone 620.225.8888 | |
|---|---|--------------------|--|
| No. No. | KCC District Office #2 / UPGS - 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 | |
| See | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651 | Phone 785.625.0550 | |