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

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# | | | API No. 15- | | | | | | |
|---|---------------------------------------|--------------|---------------------------------|--|--------------------|-------------|--------|----------|--|
| Name: | | | Spot Descri | ption: | | | | | |
| Address 1: | | | | Sec | | | | | |
| Address 2: | | | | | | | | | |
| City: | | | feet from E / W Line of Section | | | | | | |
| Contact Person: | | | | GPS Location: Lat:, Long:, Long: | | | | | |
| Phone:() | | | | 10.027 | _ | | GL | KB | |
| Contact Person Email: | | | | Lease Name: Well #: | | | | | |
| Field Contact Person: | | | | Well Type: (check one) Oil Gas OG WSW Other: | | | | | |
| Field Contact Person Phone: () | | | | SWD Permit #: ENHR Permit #: | | | | | |
| . , | | | | ☐ Gas Storage Permit #: Date Shut-In: | | | | | |
| | 0.1 | | | | | | | | |
| Conductor | Surface | Pro | oduction | Intermediate | Liner | | Tubing | | |
| Size Setting Depth | | | | | | | | | |
| Amount of Cement | | | | | | | | | |
| Top of Cement | | | | | | | | | |
| Bottom of Cement | | | | | | | | | |
| Depth and Type: | of: DV Tool:(depth) | w/_ | sacks | s of cement Port | Collar:(depth) | | | f cement | |
| Total Depth: Plug Ba | Plug Back Depth: | | Plug Back Method: | | | | | | |
| Geological Date: | | | | | | | | | |
| Formation Name Formation | ion Name Formation Top Formation Base | | | Completion Information | | | | | |
| 1 At: | to Feet | Feet Perfora | | to F | eet or Open Hole I | nterval | _ to | Feet | |
| 2 At: | to Feet | Perfo | ration Interval - | to F | eet or Open Hole I | nterval | _ to | Feet | |
| IMPED DEMALTY OF DED HIDV I HEDEDV ATT | | | ctronically | | ADDECT TA THE D | EET OF MV V | NOW! E | DOE | |
| | | | | | | | | | |
| Do NOT Write in This Date Tested: Space - KCC USE ONLY | Tested: Results: | | | Date Plugged: Date Repaired: Date Put Back in Service: | | | | | |
| Review Completed by: | | Comn | nents: | | | | | | |
| TA Approved: Yes Denied Date: | | | | | | | | | |
| 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 / 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 | |
| | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651 | Phone 785.625.0550 | |