KANSAS CORPORATION COMMISSION Oil & Gas Conservation Division 1109389

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-           | API No. 15   |   |            |       |  |  |
|-----------------------------|-------------------|----------------|---------------------------------|-----------------------|--|---|------------|-------|--|--|
| Name:                       |                   |                |                                 | Spot Descri           | ption:   |   |            |       |  |  |
| Address 1:                  |                   |                |                                 | _                     | Sec.       Twp.        S. R.        E       W          feet from       N /       S Line of Section          feet from       E /       W Line of Section         GPS Location: Lat: |   |            |       |  |  |
|                             |                   |                |                                 |                       |  |   |            |       |  |  |
|                             |                   |                |                                 |                       |  |   |            |       |  |  |
|                             |                   |                |                                 |                       |  |   |            |       |  |  |
|                             |                   |                |                                 |                       |  |   |            |       |  |  |
|                             |                   |                |                                 | Lease Name            |  |   |            |       |  |  |
| Field Contact Person:       |                   |                |                                 |                       |  | Dil 🗌 Gas 🗌 OG 🗌 WSW 🗌 Oth                    |            |       |  |  |
| Field Contact Person Phone  | e:()              |                |                                 |                       |  | ENHR Permit #                                 | :          |       |  |  |
|                             | ()                |                |                                 |                       | rage Permit #: _   |   |            |       |  |  |
|                             |                   |                |                                 | Spud Date:            |  | Date Shut-In:                                 |            |       |  |  |
|                             | Conductor         | Surfac         | e                               | Production            | Intermedia   | te Liner                                      | Tubing     |       |  |  |
| Size                        |                   |                |                                 |                       |  |   |            |       |  |  |
| Setting Depth               |                   |                |                                 |                       |  |   |            |       |  |  |
| Amount of Cement            |                   |                |                                 |                       |  |   |            |       |  |  |
| Top of Cement               |                   |                |                                 |                       |  |   |            |       |  |  |
| Bottom of Cement            |                   |                |                                 |                       |  |   |            |       |  |  |
| Casing Fluid Level from Su  | face.             |                | How Determine                   | ed?                   |  | Date:   | :          |       |  |  |
| -                           |                   |                |                                 |                       |  | sacks of cement. Date                         |            |       |  |  |
| Do you have a valid Oil & G | as Lease? 🗌 Yes 🏾 | No             |                                 |                       |  |   |            |       |  |  |
| Depth and Type:             | n Hole at         | Tools in Hole  | e at                            | Casing Leaks:         | Yes No   | Depth of casing leak(s):                      |            |       |  |  |
|                             |                   |                |                                 |                       |  |   |            |       |  |  |
|                             |                   |                |                                 |                       |  | Port Collar: w /                              | Sack of ce | ement |  |  |
| Packer Type:                | Size: _           |                | In                              | ch Set at:            |  | _ Feet  |            |       |  |  |
| Total Depth:                | Plug Ba           | ack Depth:     |                                 | _ Plug Back Metho     | od:  |   |            |       |  |  |
|                             |                   |                |                                 |                       |  |   |            |       |  |  |
| Geological Date:            |                   |                | ne Formation Top Formation Base |                       |  | Completion Information                        |            |       |  |  |
| ·                           | Formation         | n Top Formatio | n Base                          |                       | Comp   | pletion Information                           |            |       |  |  |
| Geological Date:            |                   |                |                                 | erforation Interval _ |  | Detion Information Feet or Open Hole Interval | to         | Feet  |  |  |

## Submitted Electronically

| Do NOT Write in This<br>Space - KCC USE ONLY | Date Tested: | Results:  | Date Plugged: | Date Repaired: | Date Put Back in Service: |
|--|--------------|-----------|---------------|----------------|---------------------------|
| Review Completed by:                         |              | Comments: |               |                |                           |
| TA Approved: Yes De                          | enied Date:  |           |               |                |                           |

## Mail to the Appropriate KCC Conservation Office:

| There have been and the and and have been been been been   | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801                      | Phone 620.225.8888 |
|--|---|--------------------|
| The set of  | KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.630.4000 |
| No.         No. <td>KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720</td> <td>Phone 620.432.2300</td>   | KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720                             | Phone 620.432.2300 |
| And the second s | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                             | Phone 785.625.0550 |