KANSAS CORPORATION COMMISSION 1133187

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 Description:  |                  |                          |                |  |                            |           |         |     |                              |               |               |        |  |
|   |   |                 |                 | Sec.       Twp.        S. R.        E       W          feet from       N /       S Line of Section          feet from       E /       W Line of Section         GPS Location: Lat: |                  |                          |                |  |                            |           |         |     |                              |               |               |        |  |
|   |   |                 |                 |  |                  |                          |                |  | Field Contact Person:      |           |         |     |                              |               |               |        |  |
|   |   |                 |                 |  |                  |                          |                |  | Field Contact Person Phone | ə:()      |         |     | SWD Permit #: ENHR Permit #: |               |               |        |  |
|   |   |                 |                 |  |                  |                          |                |  |                            |           |         |     |                              | age Permit #: | Date Shut-In: |        |  |
|   |   |                 |                 |  |                  |                          |                |  |                            | Conductor | Surface | Pro | duction                      | Intermediate  | Liner         | Tubing |  |
|   |   |                 |                 |  |                  |                          |                |  | Size                       |           |         |     |                              |               |               |        |  |
| Setting Depth   |   |                 |                 |  |                  |                          |                |  |                            |           |         |     |                              |               |               |        |  |
| Amount of Cement  |   |                 |                 |  |                  |                          |                |  |                            |           |         |     |                              |               |               |        |  |
| Top of Cement   |   |                 |                 |  |                  |                          |                |  |                            |           |         |     |                              |               |               |        |  |
| Bottom of Cement  |   |                 |                 |  |                  |                          |                |  |                            |           |         |     |                              |               |               |        |  |
| Casing Fluid Level from Su                                      | rface:                                    |                 | How Determined? |  |                  | Date: _                  |                |  |                            |           |         |     |                              |               |               |        |  |
| Casing Squeeze(s):  | to w                                      | / sac           | ks of cement,   | to   | oottom) w /      | sacks of cement. Date: _ |                |  |                            |           |         |     |                              |               |               |        |  |
| Do you have a valid Oil & G                                     | as Lease? 🗌 Yes [                         | No              |                 |  |                  |                          |                |  |                            |           |         |     |                              |               |               |        |  |
| Depth and Type:   | in Hole at                                | Tools in Hole a | : Ca            | sing Leaks: 🔲  | Yes 🗌 No De      | epth of casing leak(s):  |                |  |                            |           |         |     |                              |               |               |        |  |
|   | (depth)                                   |                 |                 |  |                  |                          |                |  |                            |           |         |     |                              |               |               |        |  |
|   |   | of: DV Tool:    | W /             | sacks of   | DI Cement I I PO | ort Collar: w /          | sack of cement |  |                            |           |         |     |                              |               |               |        |  |
| Type Completion: ALT  | .I ALT. II Depth                          |                 |                 |  |                  |                          | sack of cement |  |                            |           |         |     |                              |               |               |        |  |
| Type Completion: ALT Packer Type:                               | . I ALT. II Depth                         |                 | Inch            | Set at:  |                  | Feet                     | sack of cement |  |                            |           |         |     |                              |               |               |        |  |
| Type Completion: ALT Packer Type:                               | . I ALT. II Depth                         |                 | Inch            | Set at:  |                  | Feet                     | sack of cement |  |                            |           |         |     |                              |               |               |        |  |
| Type Completion: ALT Packer Type:                               | . I ALT. II Depth                         |                 | Inch            | Set at:  |                  | Feet                     | sack of cement |  |                            |           |         |     |                              |               |               |        |  |
| Type Completion: ALT Packer Type: Total Depth:                  | . I ALT. II Depth                         |                 | Inch            | Set at:  | d:               | Feet                     | sack of cement |  |                            |           |         |     |                              |               |               |        |  |
| Type Completion: ALT Packer Type: Total Depth: Geological Date: | I ALT. II Depth<br>Size: Size:<br>Plug Ba | ack Depth:      | Inch            | Set at:  | d:<br>Comple     | 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:

| $\begin{array}{c ccccccccccccccccccccccccccccccccccc$  | 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 |
| State         State <th< th=""><td>KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651</td><td>Phone 785.625.0550</td></th<> | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                             | Phone 785.625.0550 |



Phone: 620-432-2300 Fax: 620-432-2309 http://kcc.ks.gov/

Mark Sievers, Chairman Thomas E. Wright, Commissioner Shari Feist Albrecht, Commissioner Sam Brownback, Governor

May 09, 2013

Randy Peterson L & G Petroleum Operating, LLC 1000 CAMINO DEL OESTE BAKERSFIELD, CA 93309-7102

Re: Temporary Abandonment API 15-001-02192-00-00 GREEN 4H NW/4 Sec.11-24S-18E Allen County, Kansas

Dear Randy Peterson:

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

## OVR10 - Shut in over 10 years

In accordance with K.A.R. 82-3-111, this well must be plugged or returned to service by June 08, 2013.

You may file an application for an exception to the 10-year limitation in K.A.R. 82-3-111 to demonstrate why it is necessary to TA the above well for more than (10) years. You must notify the Commission in writting no later than June 08, 2013 of your intention to file the application, and your complete application is due July 08, 2013. All applications and written notifications must be sent to the attention of the Excutive Director at the Kansas Corporation Commission Conservation Division at 130 South Market, Room 2078, Wichita, Kansas 67202.

You may contact me at the number above if you have any questions.

Sincerely,

Ryan Duling