KANSAS CORPORATION COMMISSION 1156646

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	Spot Description:							
Address 1:				_	Sec Twp S. R E [] W							
Address 2:						feet from N / [
City:	State:	Zip:	+									
Contact Person:												
Phone:()												
Contact Person Email:				Lease Name								
Field Contact Person:						il 🗌 Gas 🗌 OG 🗌 WSW 🗌 Oth						
Field Contact Person Phon	e:()				SWD Permit #: ENHR Permit #:							
	, , , , , , , , , , , , , , , , , , ,				rage Permit #:	Date Shut-In:						
				Spud Dale.								
	Conductor	Surfac	e	Production	Intermediat	e Liner	Tubing					
Size												
Setting Depth												
Amount of Cement												
Top of Cement												
Bottom of Cement												
Casing Fluid Level from Su	rface:		How Determine	ed?		Date:						
Casing Squeeze(s):	to w	/s	acks of cement,	to	w /	sacks of cement. Date:						
Do you have a valid Oil & G	ias Lease? Ses	No										
Depth and Type: 🗌 Junk	in Hole at	Tools in Hole	e at	Casing Leaks:	Yes No [Depth of casing leak(s):						
								f cement				
	. I ALL I Depth		(1, 4)									
Type Completion: ALT												
Type Completion: ALT Packer Type:	Size: _		Ir	ch Set at:		- Feet						
Type Completion: ALT Packer Type:	Size: _		Ir	ch Set at:		- Feet						
Type Completion: ALT Packer Type:	Size: _		Ir	ch Set at:		- Feet						
Type Completion: ALT Packer Type: Total Depth: Geological Date:	Size: Size: Plug Bi		Ir	ch Set at:	od:	- Feet						
Type Completion: ALT Packer Type: Total Depth:	Size: Plug Bi Formation	ack Depth:	n Base	ich Set at:	od: Comp	. 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 De	enied Date:				

Mail to the Appropriate KCC Conservation Office:

Norm bath lass nos tak an Andrikanan mad and being	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.225.8888
Norm Norm <td< th=""><td>KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226</td><td>Phone 316.630.4000</td></td<>	KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226	Phone 316.630.4000
1 1	KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720	Phone 620.432.2300
And here the first the termination of ter	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550

PRODUCER _____RING ENERGY_ CSG_ WT SET @ _____ TD ____ PB GL PRECISION WIRELINE and TESTING WELL NAME <u>NALLY 1-7</u> TBG WT SET @ SN PKR _____ KB P.O. BOX 560 LOCATION ________ S/2 7-27S-30W TO TO PERFS TO_ TO . _ , _ ______TAPS ______@____ LIBERAL, KANSAS 67905-0560 COUNTY GRAY STATE KS PROVER_ METER ORIFICE TCR PCR RESERVOIR GG_ _ API ____ GM _____ 620-624-4505

DATE ELAP TIME OF TIME READING HOUR		WELLHEAD PRESSURE DATA				MEASUREMENT DATA				LIQUIDS		TYPE INITIAL TEST: ANNUAL	SPEICAL	ENDING			
	TIME	TIME	TIME	CSG PSIG	ΔP CSG	TBG PSIG	ΔP TBG	BHP PSIG	ΔP BHP	PRESS PSIG	DIFF.	TEMP	Q MCFD	COND	WATER		
	HOUR	1310	USG	1310	IBG	1310	внр	1310	DIT.	TEMP	MCFD	BBLS.	BBLS.	REMARKS PERT	INENT TO TEST	DATA QUALITY	
FRIDAY																	
8-23-13														ASSUME AVERAGE			
0845		448.2		448.2										CONDUCT LIQUID			
														SHOT	JTS TO	DISTANCE	
														#	FLUID	TO FLUID	
														1	81.5	2567'	
														2	81.5	2567'	
-																	
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	}	}															
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Page _____ of _____