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

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

| OPERATOR: License# | | | | | API No. 15- | · | | | | | |
|---|-------------|------------|--------------------------|---------------|--|---|---------------------------|---------------------------|--------|-----------|--|
| Name: | | | | | | Spot Description: | | | | | |
| Address 1: | | | | | · · | Sec. | Twp | _ S. R | | E W | |
| Address 2: | | | | | | | feet from | | | | |
| City: | | | | | | feet from E / W Line of Section | | | | | |
| Contact Person: | | | | | GPS Location: Lat:, Long: | | | | | | |
| | | | | | | | | | □GI | □ĸĸ | |
| Phone:() Contact Person Email: | | | | | County: Elevation: GL KB Lease Name: Well #: | | | | | | |
| | | | | | | Well Type: (check one) Oil Gas OG WSW Other: | | | | | |
| Field Contact Person Phone: (| | | | | | SWD Permit #: ENHR Permit #: | | | | | |
| Field Contact Person Phone: () | | | | | | Gas Storage Permit #: Date Shut-In: | | | | | |
| | | | | | Spud Date: | | Date Shut- | ln: | | | |
| | Cond | luctor | Surface | Pro | duction | Intermediate | Liner | | Tubing | , | |
| Size | | | | | | | | | | | |
| Setting Depth | | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | | |
| Top of Cement | | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | | |
| Depth and Type: | I ALT. | II Depth o | of: DV Tool:(depth) | w / _ Inch | sack Set at: | s of cement Po | rt Collar:(depth) Feet | | | of cement | |
| Geological Date: | | | | | | | | | | | |
| Formation Name | | Formation | Top Formation Base | | | Comple | tion Information | | | | |
| | | | toFeet | Perfo | ration Interval | • | Feet or Open Hole | nterval | to | Feet | |
| 2 | | | to Feet | | | | Feet or Open Hole | | | | |
| HINDED DENALTY OF BED | IIIBV I LIE | | CT TUAT TUE INCODAMA | TION CO | | DEIN IS TRITE AND | · | | | | |
| Do NOT Write in This Date Tested: Space - KCC USE ONLY | | Results: | | | Date Plugged: Date Repaired: D | | Date Pu | Date Put Back in Service: | | | |
| Review Completed by: | | | | Comm | nents: | | | | | | |
| TA Approved: Yes | Denied | Date: | | | | | | | | | |
| | | | Mail to the App | ropriate l | KCC Conserv | vation Office: | | | | | |
| | | KCC Diete | iot Office #1 210 F Fran | atulou Cui | to A. Dodge C | it. VC 67904 | | D | 600.00 | DE 0000 | |

| Notes today today man one one one one one book manage man one one today | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | Phone 620.225.8888 | |
|---|---|--------------------|--|
| Name Name | 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 | |