



TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 Contact Person Email: _____
 Field Contact Person: _____
 Field Contact Person Phone: (_____) _____

API No. 15- _____
 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: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)
 Datum: NAD27 NAD83 WGS84
 County: _____ Elevation: _____ GL KB
 Lease Name: _____ Well #: _____
 Well Type: (check one) Oil Gas OG WSW Other: _____
 SWD Permit #: _____ ENHR Permit #: _____
 Gas Storage Permit #: _____
 Spud Date: _____ Date Shut-In: _____

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size						
Setting Depth						
Amount of Cement						
Top of Cement						
Bottom of Cement						

Casing Fluid Level from Surface: _____ How Determined? _____ Date: _____

Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
(top) (bottom) (top) (bottom)

Do you have a valid Oil & Gas Lease? Yes No

Depth and Type: Junk in Hole at _____ Tools in Hole at _____ Casing Leaks: Yes No Depth of casing leak(s): _____
(depth) (depth)

Type Completion: ALT. I ALT. II Depth of: DV Tool: _____ w / _____ sacks of cement Port Collar: _____ w / _____ sack of cement
(depth) (depth)

Packer Type: _____ Size: _____ Inch Set at: _____ Feet

Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name	Formation Top	Formation Base	Completion Information
1. _____	At: _____	to _____ Feet	Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet
2. _____	At: _____	to _____ Feet	Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

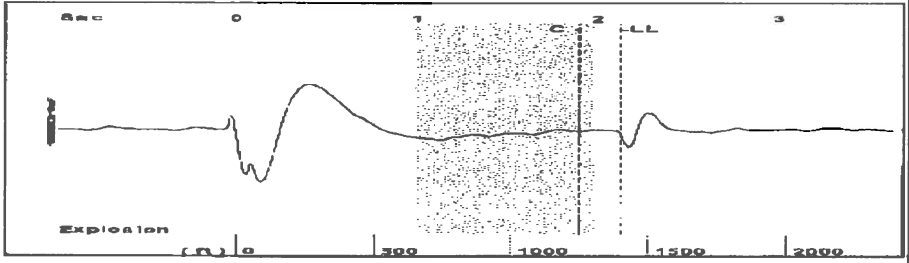
Do NOT Write in This Space - KCC USE ONLY	Date Tested: _____	Results: _____	Date Plugged: _____	Date Repaired: _____	Date Put Back in Service: _____
	Review Completed by: _____ Comments: _____				
TA Approved: <input type="checkbox"/> Yes <input type="checkbox"/> Denied Date: _____					

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

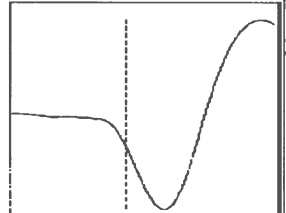
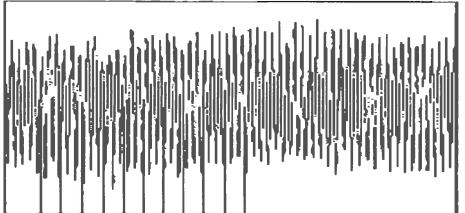
Murphy Dry Land

Group: Radium Well: Ward feed (acquired on: 05/08/14 17:54:02)



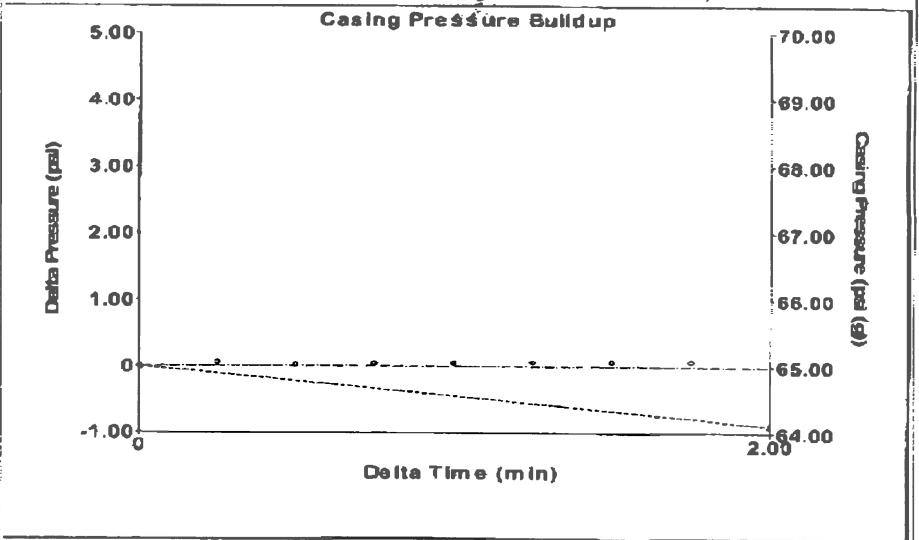
Filter Type High Pass Automatic Collar Count Yes Time 2.127 sec
 Manual Acoustic Velo 1338.43 ft/s Manual JTS/sec 21.8341 Joints 45.6158 Jts
 Depth 1398.12 ft

[1.0 to 2.0 (Sec)]



Analysis Method: Automatic

Group: Radium Well: Ward feed (acquired on: 05/08/14 17:54:02)

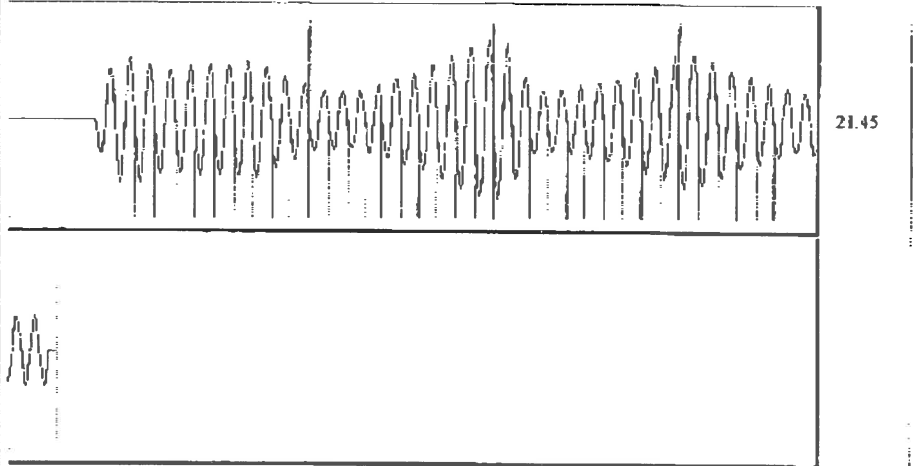


Change in Pressure -0.90 psi PT13440
 Change in Time 2.00 min Range 0 - 7 psi

Group: Radium Well: Ward feed (acquired on: 05/08/14 17:54:02)

Production Current	Potential	Casing Pressure	Producing
Oil -.-	-.- BBL/D	65.0 psi (g)	
Water -.-	-.- BBL/D	Casing Pressure Buildup	Annular Gas Flow
Gas -.-	-.- Mscf/D	-0.896 psi	1 Mscf/D
		2.00 min	% Liquid
IPR Method	Vogel	Gas/Liquid Interface Pressure	100 %
PBHP/SBHP	-.-	67.6 psi (g)	
Production Efficiency	0.0		
Oil 40 deg API		Liquid Level Depth	
Water 1.03 Sp.Gr.H2O		1398.12 ft	
Gas 0.68 Sp.Gr.AIR		Pump Intake Depth	
Acoustic Velocity	1314.64 ft/s	-.- ft	
		Formation Depth	
		1726.00 ft	
Formation Submergence			Pump Intake
Total Gaseous Liquid Column HT (TVD)	328 ft		-.- psi (g)
Equivalent Gas Free Liquid HT (TVD)	328 ft		Producing BHP
			216.7 psi (g)
			Static BHP
Acoustic Test			-.- psi (g)

Group: Radium Well: Ward feed (acquired on: 05/08/14 17:54:02)



Acoustic Velocity 1314.64 ft/s Joints counted 35
 Joints Per Second 21.4461 jts/sec Joints to liquid level 45.6158
 Depth to liquid level 1398.12 ft Filter Width 19.8341 23.8341
 Automatic Collar Count Yes Time to 1st Collar 0.268 1.9

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form T-1
March 2010
Form must be Typed
Form must be Signed
All blanks must be Filled

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form.

Check Applicable Boxes:

Oil Lease: No. of Oil Wells _____ **

Gas Lease: No. of Gas Wells 1 **

Gas Gathering System: _____

Saltwater Disposal Well - Permit No.: _____

Spot Location: 4620 feet from N / S Line
4620 feet from E / W Line

Enhanced Recovery Project Permit No.: _____

Entire Project: Yes No

Number of Injection Wells _____ **

Field Name: Heizer Southwest

Effective Date of Transfer: 5-12-12

KS Dept of Revenue Lease No.: 223314

Lease Name: MURPHY DRYLAND

____ - ____ - NW - NW Sec. 28 Twp. 19S R. 14 E W

Legal Description of Lease: NW/4 OF NW/4 Sec. 28-19S-14W

County: Barton

Production Zone(s): Chase

Injection Zone(s): _____

**** Side Two Must Be Completed.**

Surface Pit Permit No.: _____ (API No. if Drill Pit, WO or Haul) _____ feet from N / S Line of Section
_____ feet from E / W Line of Section

Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling

Past Operator's License No. 31649

Past Operator's Name & Address: Ward Feed Yard, Inc.
P.O. Box H, Larned, Kansas 67550

Title: CFO

Contact Person: Jon Skelton

Phone: (620) 793-9200

Date: 5-15-14

Signature: Jon Skelton

New Operator's License No. 5056

New Operator's Name & Address: F.G. Holl Company, LLC
9431 E. Central, Suite 100, Wichita, Kansas 67206

Title: Managing Member

Contact Person: Margery L. Nagel

Phone: (316) 684-8481

Oil / Gas Purchaser: NCRA

Date: 5-16-14

Signature: Margery Nagel

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ . Recommended action: _____

Date: _____

Authorized Signature

_____ is acknowledged as
the new operator of the above named lease containing the surface pit
permitted by No.: _____

Date: _____

Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____

Mail to: Past Operator _____ New Operator _____ District _____

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Must Be Filed For All Wells

KDOR Lease No.: 223314

* Lease Name: MURPHY DRYLAND * Location: C NW NW/4 Sec. 28-19S-14W

Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-009-24658	4620	4620	SIGW	TA
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

A separate sheet may be attached if necessary

* When transferring a unit which consists of more than one lease please file a separate side two for each lease. If a lease covers more than one section please indicate which section each well is located.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2010

Form Must Be Typed
Form must be Signed
All blanks must be Filled

CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 31649
Name: Ward Feed Yard, Inc.
Address 1: P.O. Box H,
Address 2: _____
City: Larned State: KS Zip: 67550
Contact Person: Jon Skelton
Phone: (620) 793-9200 Fax: (620) 792 2678
Email Address: jon.skelton@slsbeef.com

Well Location:
_____-_____-NW-_____-NW Sec. 28 Twp. 19S S. R. 14 East West
County: BT
Lease Name: MURPHY DRYLAND Well #: 1-28

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: Mark D. Calcara
Address 1: 702 NW 10 Rd.
Address 2: _____
City: Great Bend State: KS Zip: 67530

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 5-15-14 Signature of Operator or Agent: _____ Title: CFO

Conservation Division
District Office No. 4
2301 E. 13th Street
Hays, KS 67601-2651



Phone: 785-625-0550
Fax: 785-625-0564
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair
Jay Scott Emler, Commissioner
Pat Apple, Commissioner

Sam Brownback, Governor

June 02, 2014

Franklin R. Greenbaum
F. G. Holl Company L.L.C.
9431 E CENTRAL STE 100
WICHITA, KS 67206-2563

Re: Temporary Abandonment
API 15-009-24658-00-00
Murphy Dryland 1
NW/4 Sec.28-19S-14W
Barton County, Kansas

Dear Franklin R. Greenbaum:

"Your temporary abandonment (TA) application for the well listed above has been approved. In accordance with K.A.R. 82-3-111 the TA status of this well will expire 06/02/2015.

- * If you return this well to service or plug it, please notify the District Office.
- * If you sell this well you are required to file a Transfer of Operator form, T-1.
- * If the well will remain temporarily abandoned, you must submit a new TA application, CP-111, before 06/02/2015.

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

Very truly yours,

RICHARD WILLIAMS"