KANSAS CORPORATION COMMISSION Oil & Gas Conservation Division 1195974

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: | | | | | |
| Address 1: | | | | | Sec | Twp | _ S. R | [] | E 🗌 W |
| Address 2: | | | | | | | | | |
| City: | State: | _ Zip: + | | | ant lati | | | | Section |
| Contact Person: | | | | GPS Location: Lat: | | | | | |
| | | | | | | | | | |
| Field Contact Person: | | | | | check one) 🗌 Oil 🗌 | | | | |
| Field Contact Person Phon | e:() | | | SWD Permit #: ENHR Permit #: | | | | | |
| | () | | | | orage Permit #: | | | | |
| | | | | Spud Date: | | Date Shut-II | n: | | |
| | Conductor | Surface | Pro | duction | Intermediate | Liner | | Tubing | |
| Size | | | | | | | | | |
| Setting Depth | | | | | | | | | |
| Amount of Cement | | | | | | | | | |
| Top of Cement | | | | | | | | | |
| Bottom of Cement | | | | | | | | | |
| Casing Fluid Level from Su | Irface: | How De | termined? | | | | Date: _ | | |
| Casing Squeeze(s): | to w | / sacks of ce | ment, | to | w / | sacks of ceme | ent. Date: _ | | |
| Do you have a valid Oil & G | | | | | . , | | | | |
| Depth and Type: 🗌 Junk | in Hole at [| Tools in Hole at | Ca | sing Leaks: | Yes No Dept | h of casing leak(s): _ | | | |
| | | | | | | | | | f cement |
| Type Completion: ALT | | | | | | | _ •• / | | roomont |
| Packer Type: | Size: | | Inch | Set at: | Fee | et | | | |
| Total Depth: | Plug Ba | ck Depth: | i | Plug Back Meth | od: | | | | |
| Geological Date: | | | | | | | | | |
| Formation Name | Formation | Top Formation Base | | | Completio | n Information | | | |
| 1 | At: | to Feet | Perfo | ration Interval | toF | eet or Open Hole Ir | nterval | to | Feet |
| 2 | At: | to Feet | Perfo | ration Interval - | to F | eet or Open Hole Ir | nterval | to | 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 🗌 D | 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 |
| $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ | 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 |