KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1197231

Form CP-111
June 2011
Form must be Typed
Form must be signed
*All blanks must be complete*

# TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# 33701
Name: XOG Operating, LLC
Address 1: PO BOX 352
Address 2:
City: MIDLAND State: TX Zip: 79702 + 0352
Contact Person: ANGIE CRAWFORD
Phone: ( 432 ) 683-3171
Contact Person Email: acrawford@xogoperating.com
Field Contact Person: Ron Wells
Field Contact Person Phone: ( 620 ) 353-4238

API No. 15- 15-075-20201-00-00
Spot Description:
___ - ___ - NW - SE Sec. 27 Twp. 25 S. R. 39 ☐ E ☑ W
2012 feet from ☐ N / ☑ S Line of Section
1949 feet from ☑ E / ☐ W Line of Section
GPS Location: Lat: 37.847323 (e.g. xx.xxxxx), Long: -101.585248 (e.g. -xxx.xxxxx)
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Hamilton Elevation: ☐ GL ☐ KB
Lease Name: R M EBGLERT Well #: 27-1
Well Type: *(check one)* ☐ Oil ☑ Gas ☐ OG ☐ WSW ☐ Other:
☐ SWD Permit #: ☐ ENHR Permit #:
☐ Gas Storage Permit #:
Spud Date: 08/27/1977 Date Shut-In: 08/12/2010

| | Conductor | Surface | Production | Intermediate | Liner | Tubing |
|---|---|---|---|---|---|---|
| Size | 0 | 8.625 | 5.5 | 0 | 0 | 2.375 |
| Setting Depth | 0 | 617 | 2994 | 0 | 0 | 2757 |
| Amount of Cement | 0 | 400 | 800 | 0 | 0 | 0 |
| Top of Cement | 0 | 0 | 0 | 0 | 0 | 0 |
| Bottom of Cement | 0 | 0 | 0 | 0 | 0 | 0 |

Casing Fluid Level from Surface: 2268 How Determined? Echometer Date: 03/26/2014
Casing Squeeze(s): 2894 (top) to 5958 (bottom) w / 200 sacks of cement, ___ (top) to ___ (bottom) w / ___ sacks of cement. Date: 12/05/1977
Do you have a valid Oil & Gas Lease? ☑ Yes ☐ No
Depth and Type: ☐ Junk in Hole at ___ (depth) ☐ Tools in Hole at ___ (depth) Casing Leaks: ☐ Yes ☑ No Depth of casing leak(s):
Type Completion: ☑ ALT. I ☐ ALT. II Depth of: ☐ DV Tool: ___ (depth) w / ___ sacks of cement ☐ Port Collar: ___ (depth) w / ___ sack of cement
Packer Type: Size: Inch Set at: Feet
Total Depth: 3000 Plug Back Depth: 2888 Plug Back Method: Unknown

***Geological Date:***

| **Formation Name** | Formation Top | Formation Base | Completion Information |
|---|---|---|---|
| 1. Council Grove | At: | to Feet | Perforation Interval 2852 to 2769 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: Steve Pfeifer Comments:
TA Approved: ☑ Yes ☐ 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 |