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

## All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| DPERATOR: License#   |                      |                     |             | API No. 15 Spot Description:  |                     |                          |                      |                                 |           |         |     |                 |              |          |         |
|--|----------------------|---------------------|-------------|---|---------------------|--------------------------|----------------------|---------------------------------|-----------|---------|-----|-----------------|--------------|----------|---------|
|  |                      |                     |             |   |                     |                          |                      | Address 1:                      |           |         |     |                 | · Sec        | Twp S. R | 🗌 E 🔲 W |
| Address 2:       State:       Zip:       +         Contact Person: |                      |                     |             |   |                     |                          |                      |                                 |           |         |     |                 |              |          |         |
|  |                      |                     |             |   |                     |                          |                      | Field Contact Person Phone: ( ) |           |         |     | ☐ SWD Permit #: |              |          |         |
|  |                      |                     |             |   |                     |                          |                      |                                 |           |         |     |                 |              |          |         |
|  |                      |                     |             |   |                     |                          |                      |                                 | Conductor | Surface | Pro | oduction        | Intermediate | Liner    | Tubing  |
|  |                      |                     |             |   |                     |                          |                      | Size                            |           |         |     |                 |              |          |         |
|  |                      |                     |             |   |                     |                          |                      | Setting Depth                   |           |         |     |                 |              |          |         |
| Amount of Cement   |                      |                     |             |   |                     |                          |                      |                                 |           |         |     |                 |              |          |         |
| Top of Cement  |                      |                     |             |   |                     |                          |                      |                                 |           |         |     |                 |              |          |         |
| Bottom of Cement   |                      |                     |             |   |                     |                          |                      |                                 |           |         |     |                 |              |          |         |
| Depth and Type:  | ALT. II Depth o      | f: DV Tool:(depth)  | w /<br>Inch | Set at:   | s of cement Port C  | ollar: w / _<br>(depth)  |                      |                                 |           |         |     |                 |              |          |         |
|  |                      |                     |             |   |                     |                          |                      |                                 |           |         |     |                 |              |          |         |
| Geological Date:   |                      |                     |             |   |                     |                          |                      |                                 |           |         |     |                 |              |          |         |
| Formation Name   |                      | Top Formation Base  |             | Completion Information  ration Interval to Feet or Open Hole Interval to Feet |                     |                          |                      |                                 |           |         |     |                 |              |          |         |
| ·  |                      | toFeet              |             |   |                     |                          |                      |                                 |           |         |     |                 |              |          |         |
| <u>.                                    </u>                       | At:                  | to Feet             | Perfo       | ration Interval   | to Fe               | et or Open Hole Interval | toFeet               |                                 |           |         |     |                 |              |          |         |
| INDED BENALTY OF BER   | IIIDV I LIEDEDV ATTE | ET TUAT TUE INCODMA | TION CO     | NTAINED HEE   | EIN IS TOLIE AND CO | BBECT TO THE BEST O      | E MV I/NOMI EDGE     |                                 |           |         |     |                 |              |          |         |
|  |                      | Submitte            | ed Ele      | ctronicall  | у                   |                          |                      |                                 |           |         |     |                 |              |          |         |
| Do NOT Write in This<br>Space - KCC USE ONLY                       | Date Tested:         | Re                  | esults:     |   | Date Plugged:       | Date Repaired: Date      | Put Back in Service: |                                 |           |         |     |                 |              |          |         |
| Review Completed by:   |                      | nents:              |             |   |                     |                          |                      |                                 |           |         |     |                 |              |          |         |
| TA Approved: Yes   | Denied Date:         |                     |             |   |                     |                          |                      |                                 |           |         |     |                 |              |          |         |
|  |                      | Mail to the App     | ropriate    | KCC Conserv   | vation Office       |                          |                      |                                 |           |         |     |                 |              |          |         |
|  |                      | тап то тте дррг     | op. rate    |   |                     | i                        |                      |                                 |           |         |     |                 |              |          |         |

## 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