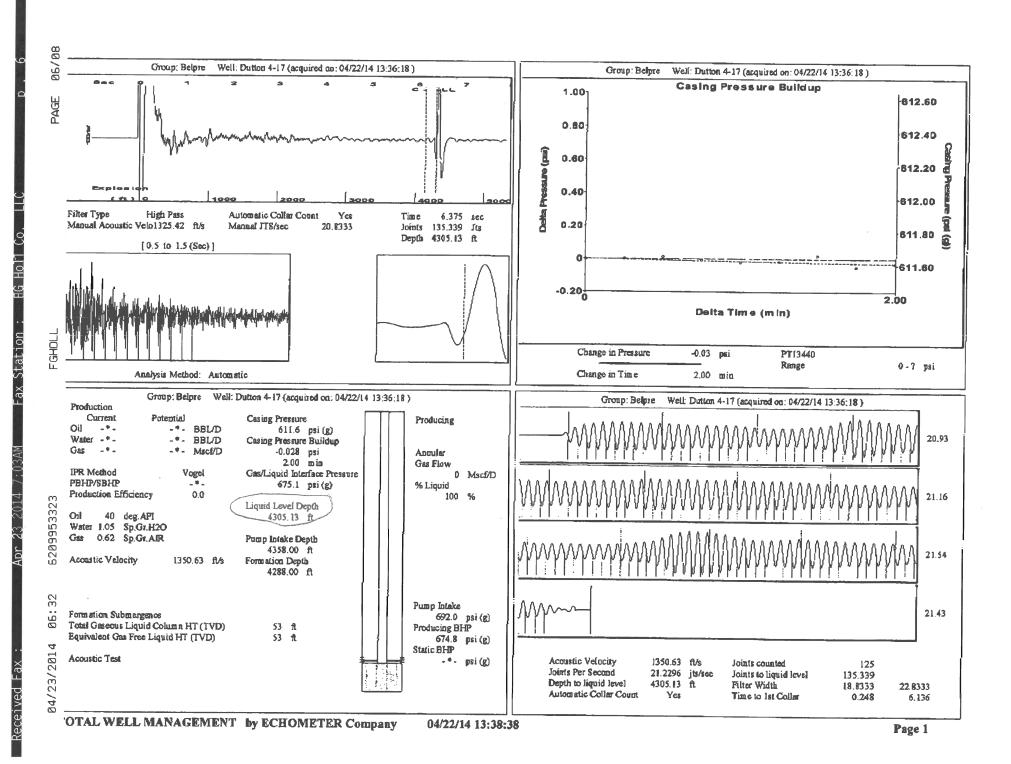
Form CP-111 June 2011 Form must be Typed

TEMPORARY ABANDONMENT WELL APPLICATION

Form must be signed All blanks must be complete

| OPERATOR: License# | | | | API No. 15- | · | | | | | | | | | | | | | | | | | |
|--|---------------------------------|---------------------|-------------|-------------------|---------------------------------|----------------------|--------------------|----------------|--------------|--|--|---------------|-----------|---------|-----|----------|--|---|-------|-----|------|--|
| Name: | | | | Spot Description: | | | | | | | | | | | | | | | | | | |
| Address 1: | | | | | Sec | ; T | wp S. F | R [| EW | | | | | | | | | | | | | |
| Address 2: | feet from N / S Line of Section | | | | | | | | | | | | | | | | | | | | | |
| City: State: Contact Person: Phone:() | | | | | feet from E / W Line of Section | | | | | | | | | | | | | | | | | |
| | | | | | GPS Location: Lat: | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | , | | | | | ☐ Gas Storage Permit #: Spud Date: Date Shut-In: | | | | | |
| | | | | | | | | | | | | | Conductor | Surface | Pro | oduction | Intermedia | e | Liner | Tub | ping | |
| | | | | | | | | | | | | Size | | | | | | | | | | |
| | | | | | | | | | | | | Setting Depth | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | | | | | | | | | | | | | |
| Top of Cement | | | | | | | | | | | | | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | | | | | | | | | | | | | |
| Depth and Type: | ALT. II Depth o | of: DV Tool:(depth) | w / Inch | Set at: | s of cement | Port Collar: Feet | | | ck of cement | | | | | | | | | | | | | |
| Formation Name | Formation | Top Formation Base | | | Comp | letion Inform | ation | | | | | | | | | | | | | | | |
| 1 | | | Porfo | ration Interval | on Intervalto | | | | Foot | | | | | | | | | | | | | |
| 2 | | to Feet | | | | | Open Hole Interval | | | | | | | | | | | | | | | |
| INDER BENALTY OF RE | O IIIDV I UEDEDV ATTE | | | ectronicall | | D COBBEC | TTATUE BEST 6 | NE BAV IZBIOIA | " EDGE | | | | | | | | | | | | | |
| Do NOT Write in This Space - KCC USE ONLY | Date Tested: | Re | | Date Plugge | d: Date f | Repaired: Date | e Put Back in S | Service: | | | | | | | | | | | | | | |
| Review Completed by: TA Approved: Yes | _ | | | | | | | | | | | | | | | | | | | | | |
| | • | Mallando - A | | VCC 0 | ration Off | | | | | | | | | | | | | | | | | |
| | | Mail to the App | ropriate | NUU Uonser | ration Office: | | | | | | | | | | | | | | | | | |

| There have been one one one one one one one of the best of the best one | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | Phone 620.225.8888 | |
|---|---|--------------------|--|
| Since | 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 | |



Conservation Division District Office No. 1 210 E. Frontview, Suite A Dodge City, KS 67801



Phone: 620-225-8888 Fax: 620-225-8885 http://kcc.ks.gov/

Sam Brownback, Governor

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

April 24, 2014

Rebecca George F. G. Holl Company L.L.C. 9431 E CENTRAL STE 100 WICHITA, KS 67206-2563

Re: Temporary Abandonment API 15-047-21223-00-00 DUTTON 4-17 NE/4 Sec.17-24S-16W Edwards County, Kansas

Dear Rebecca George:

"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 04/24/2015.

- * 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 04/24/2015.

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

Very truly yours,

Steve Pfeifer"