



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

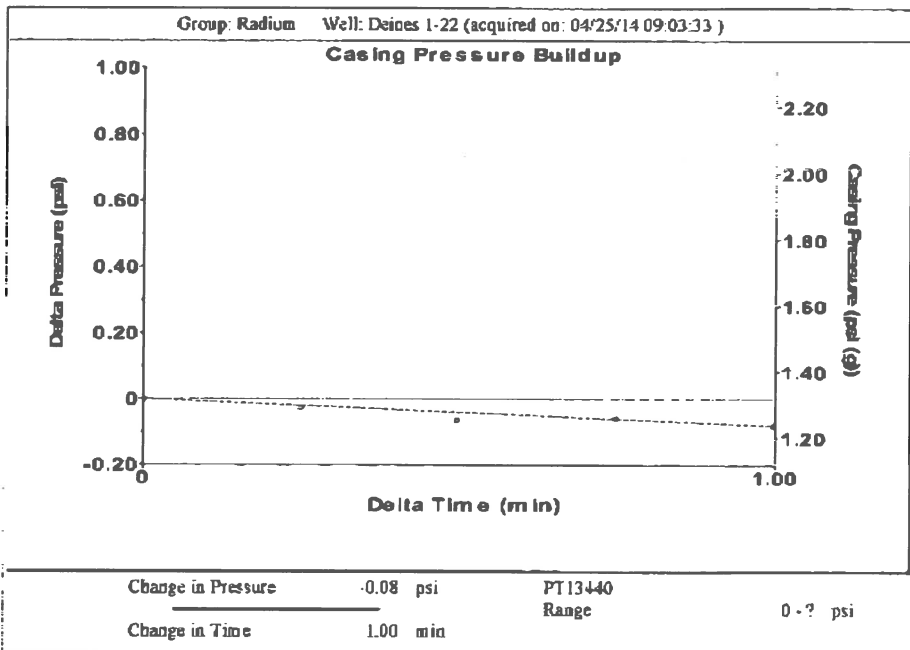
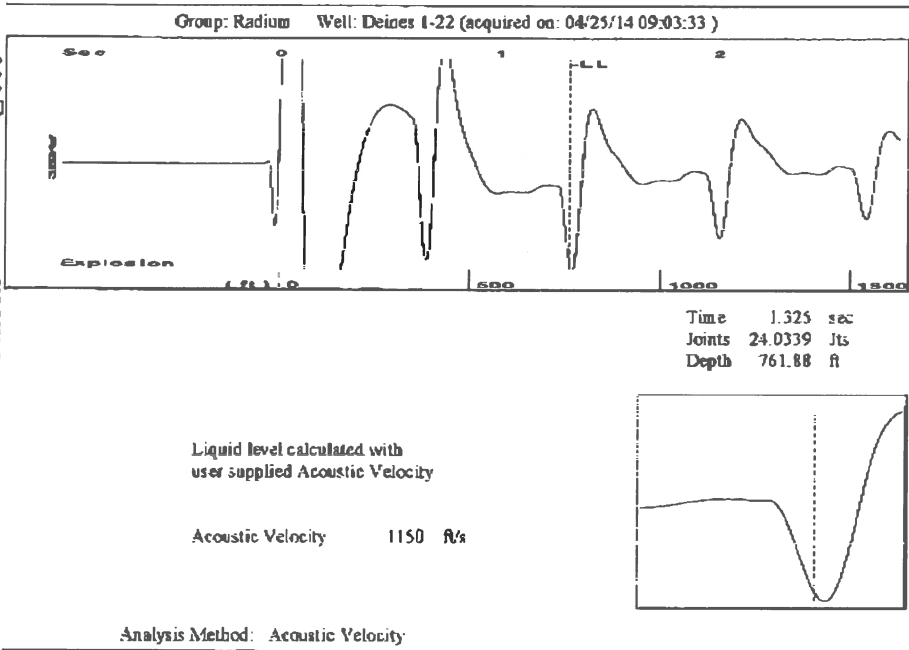
UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

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



Group: Radium Well: Deines 1-22 (acquired on: 04/25/14 09:03:33)

Production Current	Potential	Casing Pressure	Producing
Oil - . -	- . - BBL/D	1.3 psi (g)	
Water - . -	- . - BBL/D	Casing Pressure Buildup	Annular Gas Flow - . - Mscf/D
Gas - . -	- . - Mscf/D	-0.1 psi	% Liquid 100 %
		1.00 min	
IPR Method	Vogel	Gas/Liquid Interface Pressure	
PBHP/SBHP	- . -	0.4 psi (g)	
Production Efficiency	0.0		
Oil 40 deg API		Liquid Level Depth	
Water 1.05 Sp.Gr.H2O		761.88 ft	
Gas 0.85 Sp.Gr.AIR		Pump Intake Depth	
		- . - ft	
Acoustic Velocity 1150 ft/s		Formation Depth	
		3604.00 ft	
Formation Submergence			Pump Intake - . - psi (g)
Total Gaseous Liquid Column HT (TVD)	2842 ft		Producing BHP 1292.6 psi (g)
Equivalent Gas Free Liquid HT (TVD)	2842 ft		Static BHP - . - psi (g)
Acoustic Test			

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Entered Acoustic Velocity for Liquid Level depth determination

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

May 05, 2014

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

Re: Temporary Abandonment
API 15-009-25668-00-00
DEINES 1-22
SW/4 Sec.22-19S-15W
Barton 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 05/05/2015.

- * 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 05/05/2015.

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

Very truly yours,

RICHARD WILLIAMS"