



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: _____ (e.g. xx.xxxxxx) Long: _____ (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): (top) to (bottom) w / _____ sacks of cement, (top) to (bottom) w / _____ sacks of cement. Date: _____

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): _____

Type Completion: ALT. I ALT. II Depth of: DV Tool: _____ w / _____ sacks of cement Port Collar: _____ w / _____ sack of cement

Packer Type: _____ Size: _____ Inch Set at: _____ Feet

Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

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 Street, Chanute, KS 66720	Phone 620.432.2300
	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550



May 14, 2014

Kansas Corporation Commission
Conservation Division
District Office No. 4
2301 E. 13th Street
Hays, KS 67601-2651

ATTN: Mr. Richard Williams

Re: Extension Request:
Hederhorst #3
API 15-163-19309
11-9S-19W, NWNWNWNW
Rooks County, Kansas
Operator License No. 3553

Mr. Williams:

Citation Oil & Gas Corp. respectfully requests a 30-day extension to our original deadline of the end of May to plug or repair the subject well (approximately July 1st, 2014). Our plan of action is pending on the drilling of the Hederhorst #8 which will off set the location.

If you need additional information, please contact me at (281) 891-1576 or by email at msmith@cogc.com.

Sincerely,

A handwritten signature in blue ink that appears to read "Martha Smith".

Martha Smith
Regulatory Compliance Coordinator

Conservation Division
District Office No. 4
2301 E. 13th Street
Hays, KS 67601-2651



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

Phone: 785-625-0550
Fax: 785-625-0564
<http://kcc.ks.gov/>

Sam Brownback, Governor

May 13, 2014

Martha Smith
Citation Oil & Gas Corp.
14077 CUTTEN RD
PO BOX 690688
HOUSTON, TX 77269-0688

Re: Temporary Abandonment
API 15-163-19309-00-00
HENDERHORST 3
NW/4 Sec.11-09S-19W
Rooks County, Kansas

Dear Martha Smith:

"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 07/15/2014.

* 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 07/15/2014.

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

Very truly yours,

RICHARD WILLIAMS"