KANSAS CORPORATION COMMISSION Oil & Gas Conservation Division 1222848

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

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# Name: Address 1:         |                  |                  |                        | API No. 15-         Spot Description:                        |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
|---|------------------|------------------|------------------------|--|------------------|-------------------------|----------|--------|-----------|------------|--------|--------|--|--|--|-----------|--|-----------|------------|
|   |                  |                  |                        |  |                  |                         |          |        |           | Address 2: |        |        |  |  |  | feet from |  |           |            |
|   |                  |                  |                        |  |                  |                         |          |        |           | City:      | State: | Zip: + |  |  |  | feet from |  | _W Line o | of Section |
| Contact Person:                             |                  |                  |                        | GPS Location: Lat:, Long:, Long:<br>Datum: NAD27 NAD83 WGS84 |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Phone:()                                    |                  |                  |                        |  |                  | Elevation:              |          | GL     | ∟ □кв     |            |        |        |  |  |  |           |  |           |            |
| Contact Person Email:                       |                  |                  |                        |  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Field Contact Person:                       |                  |                  |                        | Well Type: (   | check one) 🗌 Oil | Gas OG W                | SW Oth   | er:    |           |            |        |        |  |  |  |           |  |           |            |
| Field Contact Person Phor                   |                  |                  |                        | SWD Permit #: ENHR Permit #:                                 |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
|   |                  |                  |                        |  | orage Permit #:  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
|   |                  |                  |                        | Spud Date:   |                  | Date Shut-              | -In:     |        |           |            |        |        |  |  |  |           |  |           |            |
|   | Conductor        | Surface          | Pro                    | duction  | Intermediate     | Liner                   |          | Tubing | 3         |            |        |        |  |  |  |           |  |           |            |
| Size  |                  |                  |                        |  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Setting Depth                               |                  |                  |                        |  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Amount of Cement                            |                  |                  |                        |  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Top of Cement                               |                  |                  |                        |  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Bottom of Cement                            |                  |                  |                        |  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Casing Fluid Level from Su                  | urface:          | How              | / Determined?          |  |                  |                         | Date:    |        |           |            |        |        |  |  |  |           |  |           |            |
| Casing Squeeze(s):                          |                  |                  |                        |  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Do you have a valid Oil & O                 | Gas Lease? 🗌 Yes | No               |                        |  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Depth and Type: 🗌 Junk                      | in Hole at       | Tools in Hole at | (donth) Ca             | sing Leaks:  | Yes No De        | epth of casing leak(s): |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Type Completion:                            |                  |                  |                        |  |                  |                         |          |        | of cement |            |        |        |  |  |  |           |  |           |            |
| Packer Type:                                |                  |                  | • •                    |  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Total Depth:                                | Plug Back Depth: |                  |                        | _ Plug Back Method:  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Geological Date:                            |                  |                  |                        |  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| Formation Name Formation Top Formation Base |                  | e                | Completion Information |  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |
| 1   | At:              | to F             | Feet Perfo             | ration Interval  | to               | Feet or Open Hole       | Interval | to     | Feet      |            |        |        |  |  |  |           |  |           |            |
| 2   | At:              | to F             | Feet Perfo             | ration Interval -  | to               | Feet or Open Hole       | Interval | to     | Feet      |            |        |        |  |  |  |           |  |           |            |
|   |                  |                  |                        |  |                  |                         |          |        | EDOE      |            |        |        |  |  |  |           |  |           |            |
|   |                  |                  |                        |  |                  |                         |          |        |           |            |        |        |  |  |  |           |  |           |            |

## Submitted Electronically

| Do NOT Write in This<br>Space - KCC USE ONLY | Date Tested: | Results:  | Date Plugged: | Date Repaired: | Date Put Back in Service: |
|--|--------------|-----------|---------------|----------------|---------------------------|
| Review Completed by:                         |              | Comments: |               |                |                           |
| TA Approved: 🗌 Yes 🗌 De                      | enied 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 |  |

Conservation Division District Office No. 2 3450 N. Rock Road Building 600, Suite 601 Wichita, KS 67226



Phone: 316-630-4000 Fax: 316-630-4005 http://kcc.ks.gov/

Shari Feist Albrecht, Chair Jay Scott Emler, Commissioner Pat Apple, Commissioner Sam Brownback, Governor

September 15, 2014

Craig Settle Shawmar Oil & Gas Co., Inc. 1116 E MAIN PO BOX 9 MARION, KS 66861-1230

Re: Temporary Abandonment API 15-115-00559-00-01 Depler 4 SE/4 Sec.26-21S-04E Marion County, Kansas

Dear Craig Settle:

"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 09/15/2015.

\* 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 09/15/2015.

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

Very truly yours,

Hunter Clark"