



TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

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 _____ (depth) Tools in Hole at _____ (depth) 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
(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 |

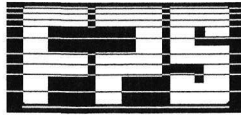
UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

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 |



FISHER PRODUCTION SERVICES, INC.

P.O. Box 3831 ♦ Enid, OK 73702-3831
Phone (580) 234-7538 ♦ Toll free 1-800-848-5759 ♦ Fax (580) 234-7570
Email: sales@fisherproduction.com ♦ www.fisherproduction.com

FLUID LEVEL REPORT

WELL DATA

COMPANY: SandRidge Energy, Inc.
LEASE: Zielke #2-8
STATE: KS
COUNTY: Comanche

CSG. SIZE: " "
CSG. DEPTH: '
ZONE:
PERFS:
T.D.: ' "

NO. TBG. JTS.:
AVG. JT. LENGTH: 31.7' approx.
TBG. SIZE: " "
TBG. DEPTH: '
TBG. ANCHOR: ' "

LOCATION: Sec. 8-33S-19W, Hwy. 160 & Hwy. 1 jct. S of Coldwater, 4 ½ W, ¼ S in to treeline, W to well.

| DATE | NO. TBG. JTS. TO FLUID | DEPTH TO FLUID | REMARKS |
|---------|------------------------|----------------|-----------------------|
| 9-17-14 | 24.26 | 769' | Shut in. C.P. 0 psig. |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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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/>

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

Sam Brownback, Governor

September 25, 2014

Tiffany Golay
SandRidge Exploration and Production LLC
123 ROBERT S. KERR AVE
OKLAHOMA CITY, OK 73102-6406

Re: Temporary Abandonment
API 15-033-20350-00-00
ZIELKE 2-8
NE/4 Sec.08-33S-19W
Comanche County, Kansas

Dear Tiffany Golay:

"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 09/25/2015.

- * 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 09/25/2015.

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

Very truly yours,

Michael Maier"