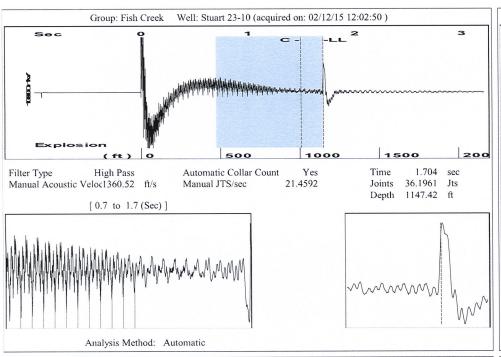
Form CP-111 June 2011 Form must be Typed Form must be signed

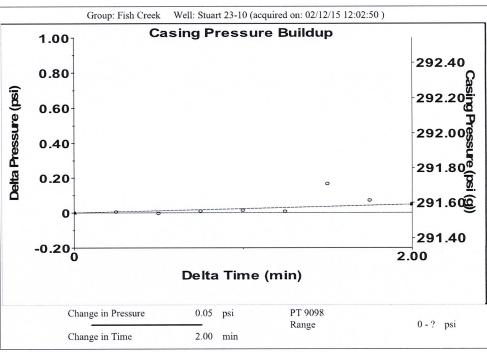
TEMPORARY ABANDONMENT WELL APPLICATION

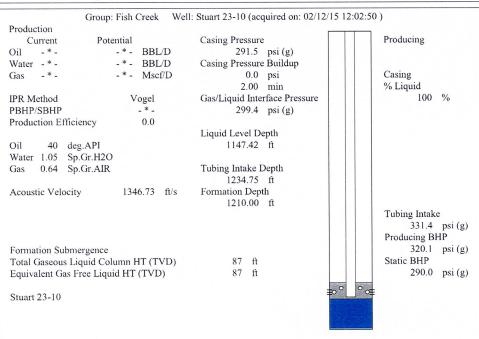
All blanks must be complete

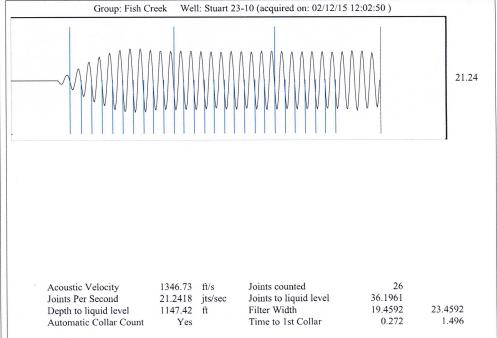
| OPERATOR: License# | | | API No. 15- | | | | | | |
|---|--------------------------------------|-------------|---------------------------------|--|--------------------------------|-------------|--------|----------|--|
| Name: | | | Spot Description: | | | | | | |
| Address 1: | | | | Sec | | | | | |
| Address 2: | | | | | | | | | |
| City: | | | feet from E / W Line of Section | | | | | | |
| Contact Person: | | | | GPS Location: Lat:, Long:, Long: | | | | | |
| Phone:() | | | | 10.027 | _ | | GL | KB | |
| Contact Person Email: | | | | Lease Name: Well #: | | | | | |
| Field Contact Person: | | | | Well Type: (check one) Oil Gas OG WSW Other: | | | | | |
| Field Contact Person Phone: () | | | | SWD Permit #: ENHR Permit #: | | | | | |
| | | | | Gas Storage Permit #: Date Shut-In: | | | | | |
| | 0.1 | | | | | | | | |
| Conductor | Surface | Pro | oduction | Intermediate | Liner | | Tubing | | |
| Size Setting Depth | | | | | | | | | |
| Amount of Cement | | | | | | | | | |
| Top of Cement | | | | | | | | | |
| Bottom of Cement | | | | | | | | | |
| Depth and Type: | of: DV Tool:(depth) | w/_ | sacks | s of cement Port | Collar:(depth) | | | f cement | |
| Total Depth: Plug Ba | Plug Back Depth: | | Plug Back Method: | | | | | | |
| Geological Date: | | | | | | | | | |
| Formation Name Formation | on Name Formation Top Formation Base | | | Completion Information | | | | | |
| 1 At: | to Feet | Feet Perfor | | to F | _ Feet or Open Hole Interval _ | | _ to | Feet | |
| 2 At: | to Feet | Perfo | ration Interval - | to F | eet or Open Hole I | nterval | _ to | Feet | |
| IMPED DEMALTY OF DED HIDV I HEDEDV ATT | | | ctronically | | ADDECT TA THE D | EET OF MV V | NOW! E | DOE | |
| | | | | | | | | | |
| Do NOT Write in This Date Tested: Space - KCC USE ONLY | sted: Results: | | | Date Plugged: Date Repaired: Date Put Back in Service: | | | | | |
| Review Completed by: | | Comn | nents: | | | | | | |
| TA Approved: Yes 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 | |









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/

Sam Brownback, Governor

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

March 25, 2015

CHERYL GALLAGHER Caerus Washco LLC 600 17TH STREET SUITE 1600N DENVER, CO 80202

Re: Temporary Abandonment API 15-023-20875-00-00 STUART 23-10 SW/4 Sec.10-03S-40W Cheyenne County, Kansas

Dear CHERYL GALLAGHER:

"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 03/25/2016.

- * 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 03/25/2016.

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

Very truly yours,

RICHARD WILLIAMS"