KANSAS CORPORATION COMMISSION 1265489

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

## **TEMPORARY ABANDONMENT WELL APPLICATION**

|                                    |                                    |                 |                  |  |                   |                   |                   |        | API No. 15 |          |  |  |  |  |
|------------------------------------|------------------------------------|-----------------|------------------|--|-------------------|-------------------|-------------------|--------|------------|----------|--|--|--|--|
| Address 1:                         |                                    | Name:           |                  |  |                   | Spot Description: |                   |        |            |          |  |  |  |  |
|                                    | Address 1:                         |                 |                  |  | Sec Twp S. R E W  |                   |                   |        |            |          |  |  |  |  |
| Address 2:                         |                                    |                 |                  |  |                   |                   | _ feet from _     |        |            |          |  |  |  |  |
| City:   Zip: +     Contact Person: |                                    |                 |                  | GPS Location: Lat:, Long:                                    |                   |                   |                   |        |            |          |  |  |  |  |
|                                    |                                    |                 |                  | GPS Location: Lat:, Long:, Long:<br>Datum: NAD27 NAD83 WGS84 |                   |                   |                   |        |            |          |  |  |  |  |
| Phone:()                           |                                    |                 |                  |  |                   |                   | ion:              |        | GL         | KB       |  |  |  |  |
| Contact Person Email:              |                                    |                 |                  | Lease Nam  | e:                |                   | W                 | ell #: |            |          |  |  |  |  |
| Field Contact Person:              |                                    |                 |                  |  | ,                 |                   | OG WSW            |        |            |          |  |  |  |  |
| Field Contact Person Phone         |                                    |                 |                  | SWD Permit #: ENHR Permit #:                                 |                   |                   |                   |        |            |          |  |  |  |  |
|                                    | ( )                                |                 |                  |  | orage Permit #: _ |                   | _ Date Shut-In: _ |        |            |          |  |  |  |  |
| r                                  |                                    |                 |                  | Opud Date.   |                   |                   |                   | 1      |            |          |  |  |  |  |
|                                    | Conductor                          | Surface         | Pro              | oduction   | Intermedia        | ite               | Liner             |        | Tubing     |          |  |  |  |  |
| Size                               |                                    |                 |                  |  |                   |                   |                   |        |            |          |  |  |  |  |
| Setting Depth                      |                                    |                 |                  |  |                   |                   |                   |        |            |          |  |  |  |  |
| Amount of Cement                   |                                    |                 |                  |  |                   |                   |                   |        |            |          |  |  |  |  |
| Top of Cement                      |                                    |                 |                  |  |                   |                   |                   |        |            |          |  |  |  |  |
| Bottom of Cement                   |                                    |                 |                  |  |                   |                   |                   |        |            |          |  |  |  |  |
| Casing Fluid Level from Sur        | rface:                             |                 | How Determined?  |  |                   |                   |                   | Date:  |            |          |  |  |  |  |
| Casing Squeeze(s):                 | to w                               | / sac           | ks of cement,    | to   | w /               |                   | sacks of cement.  | Date:  |            |          |  |  |  |  |
| Do you have a valid Oil & G        | as Lease? 🗌 Yes 🛛                  | No              |                  |  |                   |                   |                   |        |            |          |  |  |  |  |
| Depth and Type: 🗌 Junk i           | in Hole at                         | Tools in Hole a | t Ca             | sing Leaks:  | Yes No            | Depth of ca       | ising leak(s):    |        |            |          |  |  |  |  |
| Type Completion:                   | (depth)                            | of: DV Tool:    | (depth)<br>W / _ | sacks  | s of cement       | Port Collar:      | (depth) W         | /      | _ sack of  | f cement |  |  |  |  |
| Packer Type:                       |                                    |                 |                  |  |                   |                   | (0000)            |        |            |          |  |  |  |  |
| Total Depth:                       | Plug Back Depth: Plug Back Method: |                 |                  |  |                   |                   |                   |        |            |          |  |  |  |  |
| Geological Date:                   |                                    |                 |                  |  |                   |                   |                   |        |            |          |  |  |  |  |
| Formation Name                     | Formation Top Formation Base       |                 |                  | Completion Information                                       |                   |                   |                   |        |            |          |  |  |  |  |
| 1                                  | At:                                | to              | Feet Perfo       | ration Interval  | to                | Feet or           | Open Hole Inter   | val    | _ to       | Feet     |  |  |  |  |
| 2                                  | At:                                | to              | _ Feet Perfo     | ration Interval -  | to                | Feet or           | Open Hole Inter   | val    | _ to       | Feet     |  |  |  |  |
|                                    |                                    |                 |                  |  |                   |                   |                   |        |            |          |  |  |  |  |

## 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 🗌 [                       | Denied Date: |           |               |                |                           |

## Mail to the Appropriate KCC Conservation Office:

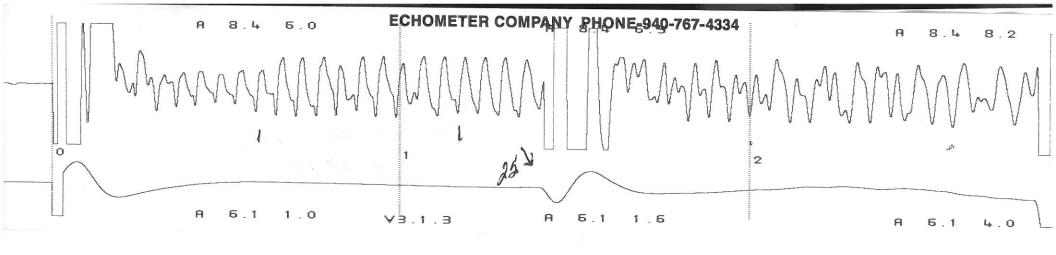
|  | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801                      | Phone 620.225.8888 |  |
|--|---|--------------------|--|
|  | KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.630.4000 |  |
|  | KCC District 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 |  |

| 10 00 15         |                      |              | ECHOMETER COMF |            |  |  |
|------------------|----------------------|--------------|----------------|------------|--|--|
| (9.29.15)        | thas packer in hole) |              | 09/29/2015     | 09: 17: 41 |  |  |
| WELL Hummel CB*2 | JOINTS TO LIQUID.    |              | QUIET WELL     |            |  |  |
| CASING PRESSURE  | DISTANCE TO LIQU     | ID. 788'     | LOWER COLLARS  |            |  |  |
| ΔP               | PBHP                 |              | P-P 0.124      | mγ         |  |  |
| ΔΤ               | SBHP                 |              |                |            |  |  |
| PRODUCTION RATE  | PROD RATE EFF, %     |              |                | A: 6,1     |  |  |
|                  | MAX PRODUCTION       | ************ | LIQUID LEVEL   | –          |  |  |
|                  |                      |              | P-P 0, 133     | mV         |  |  |

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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

October 06, 2015

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

Re: Temporary Abandonment API 15-083-20149-00-00 HUMMEL CB 2 NW/4 Sec.31-21S-24W Hodgeman County, Kansas

Dear Sarah King:

"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 10/06/2016.

\* 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 10/06/2016.

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

Very truly yours,

Michael Maier"