



**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 \_\_\_\_\_  Tools in Hole at \_\_\_\_\_ Casing Leaks:  Yes  No Depth of casing leak(s): \_\_\_\_\_  
(depth) (depth)  
 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

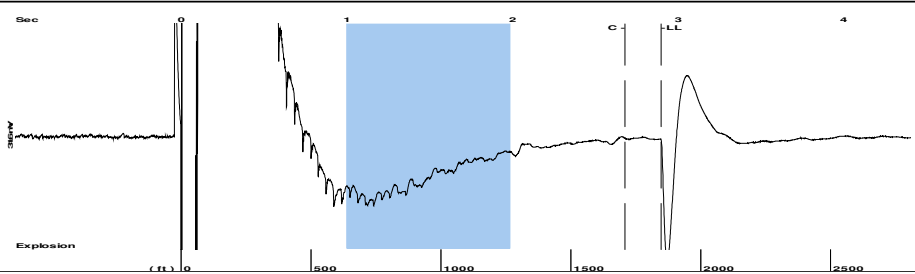
Submitted Electronically

|   |  |                |                     |                      |                                 |
|---|--|----------------|---------------------|----------------------|---------------------------------|
| <b>Do NOT Write in This Space - KCC USE ONLY</b>                                      | 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:**

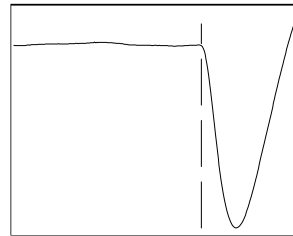
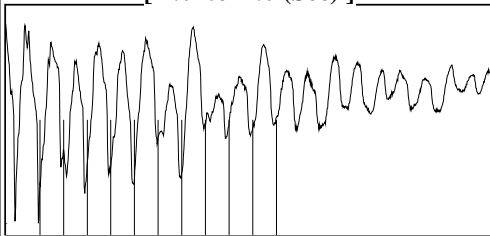
|  |   |                    |
|--|---|--------------------|
|  | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801                      | Phone 620.225.8888 |
|  | KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.630.4000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

Group: MyWells Well: WILLIAMS 2-3 (acquired on: 01/27/16 11:52:52)



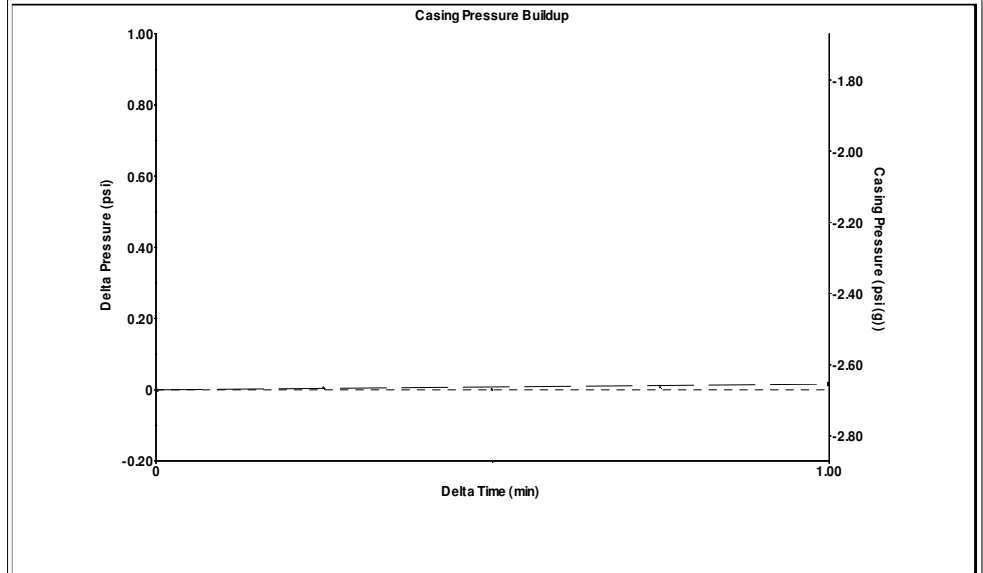
Filter Type High Pass Automatic Collar Count Yes Time 2.897 sec  
 Manual Acoustic Veloc 1261.85 ft/s Manual JTS/sec 20.5761 Joints 60.2537 Jts  
 Depth 1847.56 ft

[ 1.0 to 2.0 (Sec) ]



**Analysis Method: Automatic**

Group: MyWells Well: WILLIAMS 2-3 (acquired on: 01/27/16 11:52:52)



Change in Pressure 0.02 psi PT12896  
 Change in Time 1.00 min Range 0 - ? psi

Group: MyWells Well: WILLIAMS 2-3 (acquired on: 01/27/16 11:52:52)

Production Current Potential  
 Oil 0 - \* - BBL/D  
 Water 18.3 - \* - BBL/D  
 Gas 50.0 - \* - Mscf/D

IPR Method Vogel  
 PBHP/SBHP - \* -  
 Production Efficiency 0.0

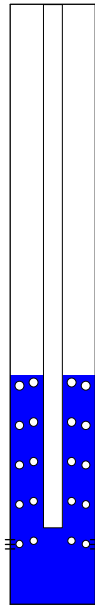
Oil 40 deg.API  
 Water 1.05 Sp.Gr.H2O  
 Gas 0.72 Sp.Gr.AIR

Acoustic Velocity 1275.5 ft/s

Formation Submergence  
 Total Gaseous Liquid Column HT (TVD) 905 ft  
 Equivalent Gas Free Liquid HT (TVD) 905 ft

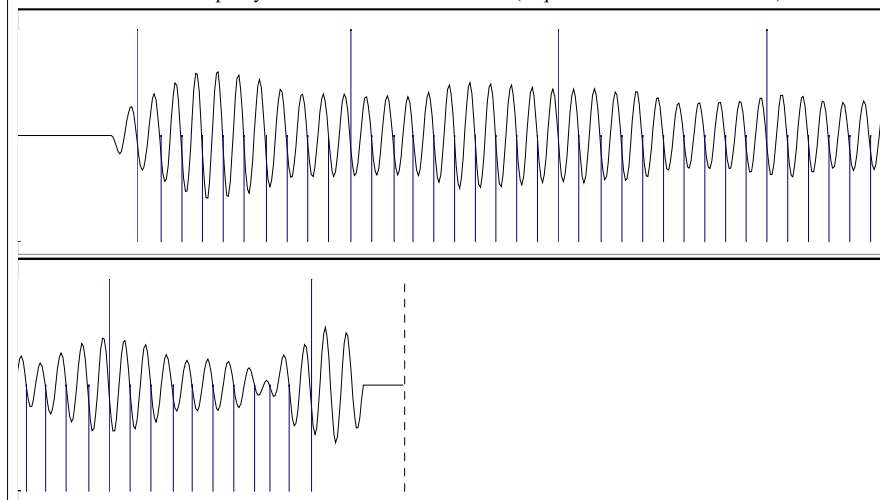
Acoustic Test 300#

Casing Pressure -2.7 psi (g)  
 Casing Pressure Buildup -0.074 psi  
 0.75 min  
 Gas/Liquid Interface Pressure -2.1 psi (g)  
 Liquid Level Depth 1847.56 ft  
 Pump Intake Depth 2753.00 ft  
 Formation Depth 2850.00 ft



Producing  
 Annular Gas Flow 0 Mscf/D  
 % Liquid 100 %  
 Pump Intake 409.5 psi (g)  
 Producing BHP 454.8 psi (g)  
 Static BHP - \* - psi (g)

Group: MyWells Well: WILLIAMS 2-3 (acquired on: 01/27/16 11:52:52)



Acoustic Velocity 1275.5 ft/s Joints counted 50  
 Joints Per Second 20.7987 jts/sec Joints to liquid level 60.2537  
 Depth to liquid level 1847.56 ft Filter Width 18.5761 22.5761  
 Automatic Collar Count Yes Time to 1st Collar 0.276 2.68

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/>

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

Sam Brownback, Governor

February 02, 2016

Shawn Hildreth  
Linn Operating, Inc.  
600 TRAVIS STE 5100  
HOUSTON, TX 77002-3018

Re: Temporary Abandonment  
API 15-067-20179-00-00  
WILLIAMS 2--3  
SW/4 Sec.19-27S-37W  
Grant County, Kansas

Dear Shawn Hildreth:

"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 02/02/2017.

- \* 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 02/02/2017.

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

Very truly yours,

Michael Maier"