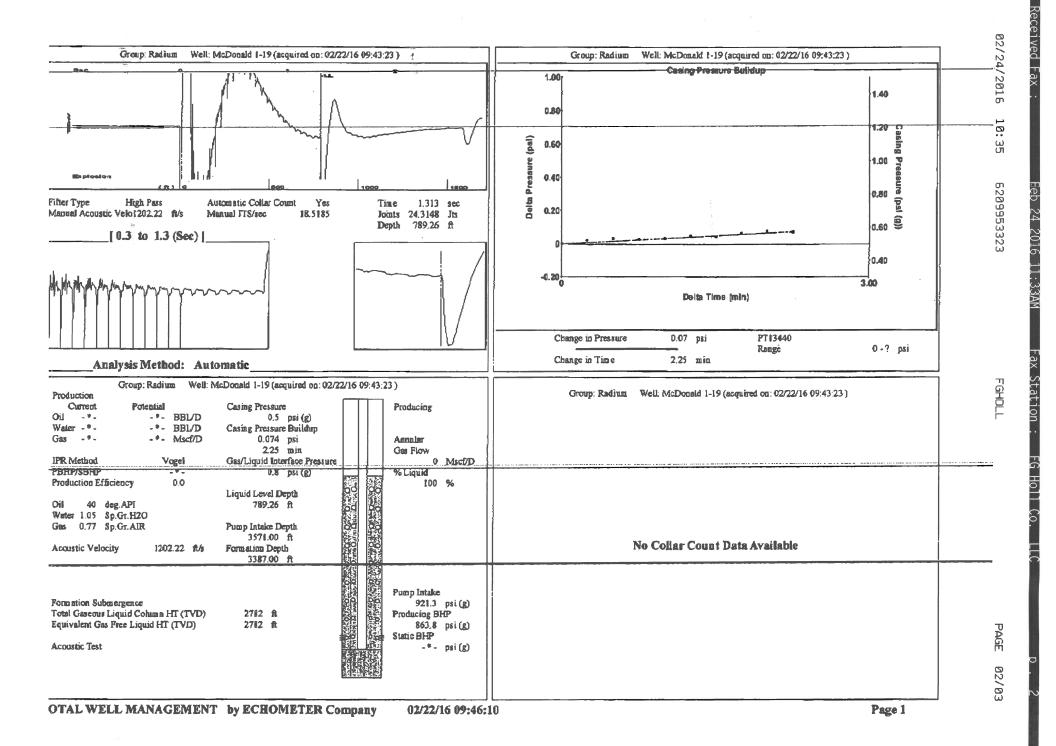
Form CP-111 June 2011 Form must be Typed Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License#		API No. 15-																			
Name:				Spot Description:																	
Address 1:					•	Twp			W												
Address 2:						feet from	N /	S Line of	Section												
City: +																					
										Phone:()											
Contact Person Email:										Lease Name: Well #: Well Type: (check one) Oil Gas OG WSW Other: SWD Permit #: ENHR Permit #:											
					,											☐ Gas Storage Permit #: Date Shut-In:					
							T T		Opud Date.								Date Glidt-				
	Conductor	Surface	Pro	oduction	Intermediate	Liner		Tubing													
Size																					
Setting Depth																					
Amount of Cement																					
Top of Cement																					
Bottom of Cement																					
Casing Fluid Level from Sur	face:	How Dete	ermined?				Date: _														
Casing Squeeze(s):	to w /	sacks of cer	nent,	to	w/	sacks of cem	ent. Date: _														
	·	_		(тор)	(bottom)																
Do you have a valid Oil & G		_		_																	
Depth and Type:	n Hole at [(depth)	Tools in Hole at(depth)	Ca	sing Leaks:	」Yes	oth of casing leak(s):															
Type Completion: ALT.	I ALT. II Depth of	of: DV Tool:(depth)	w/_	sacks	s of cement Por	t Collar:	_ w /	sack of	cement												
Packer Type:																					
Total Depth:	Plug Ba	ck Depth:		Plug Back Meth	od:																
On all orient Data																					
Geological Date:																					
Formation Name		Top Formation Base			•	ion Information			_												
l	At:					Feet or Open Hole I															
<u>.</u>	At:	to Feet	Perfo	ration Interval -	to	Feet or Open Hole I	nterval	to	Feet												
INDED DENALTY OF DED	IIIDV I UEDEDV ATTE	SET TUAT THE INCODMAT	10N CO	NTAINED HED	EIN IS TOLLE AND	CORRECT TO THE R	EST OF MV	NNOW! EL	VCE												
		Submitte	d Ela	ctronicall	.,																
		Submitte	u Lie	Cironican	у																
Do NOT Write in This Space - KCC USE ONLY				Date Plugged:	Date Repaired:	Date Put B	ack in Servio	:e:													
Review Completed by:			Comm	nents:																	
TA Approved: Yes	Denied Date:																				
		Mail to the Appro	opriate l	KCC Conserv	vation Office:																

Notes bear tree to the total and foots there were the total	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.225.8888
1000 1000 1000 1	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
Sime there have been the total process have been been the think the process of the total proc	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

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

February 25, 2016

Loveness Mpanje F. G. Holl Company L.L.C. 9431 E CENTRAL STE 100 WICHITA, KS 67206-2563

Re: Temporary Abandonment API 15-009-25856-00-00 MCDONALD 1-19 NE/4 Sec.19-20S-13W Barton County, Kansas

Dear Loveness Mpanje:

"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 02/25/2017.

- * 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 02/25/2017.

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

Very truly yours,

RICHARD WILLIAMS"