



TEMPORARY ABANDONMENT WELL APPLICATION

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: _____

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84County: _____ 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: _____

Do you have a valid Oil & Gas Lease? ☐ Yes ☐ NoDepth and Type: ☐ Junk in Hole at _____ ☐ Tools in Hole at _____ 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

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**

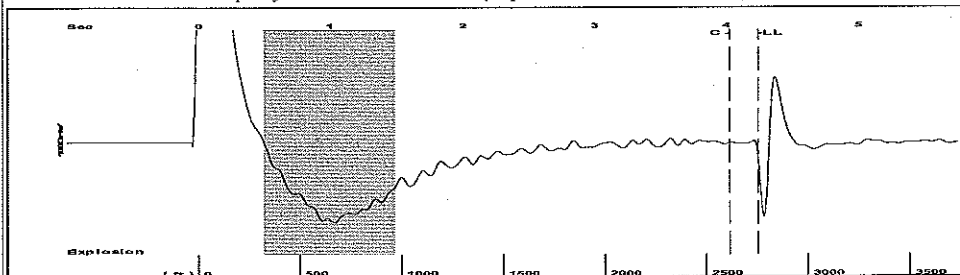
Date Tested: _____ Results: _____ Date Plugged: _____ Date Repaired: _____ Date Put Back in Service: _____

Review Completed by: _____ Comments: _____

TA Approved: ☐ Yes ☐ Denied Date: _____**Mail to the Appropriate KCC Conservation Office:**

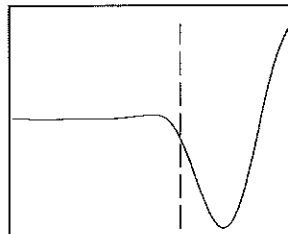
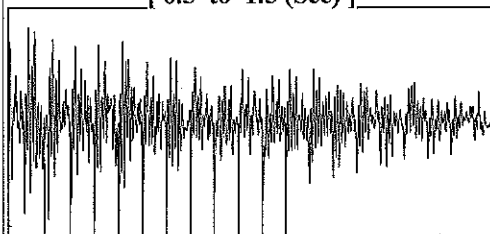
	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.225.8888
	KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226	Phone 316.630.4000
	KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720	Phone 620.432.2300
	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550

Group: MyWells Well: bear 1-18 (acquired on: 02/26/16 15:53:50)



Filter Type High Pass Automatic Collar Count Yes Time 4.237 sec
Manual Acoustic Veloc 1273.09 ft/s Manual JTS/sec 20.0803 Joints 86.8608 Jts
Depth 2753.49 ft

[0.5 to 1.5 (Sec)]



Analysis Method: Automatic

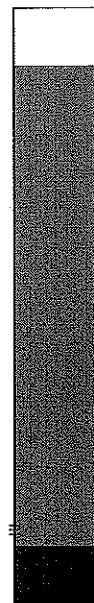
Group: MyWells Well: bear 1-18 (acquired on: 02/26/16 15:53:50)

NO PRESSURE DATA AVAILABLE

Change in Pressure 0.00 psi NONE
Range 0 - ? psi
Change in Time 0.00 min

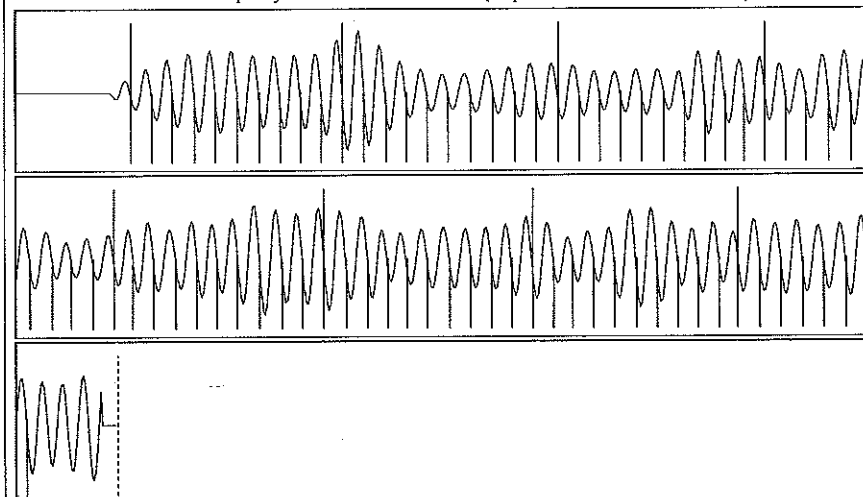
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Production
Current Potential
Oil - * - BBL/D
Water - * - BBL/D
Gas - * - Mscf/D
IPR Method Vogel
PBHP/SBHP - * -
Production Efficiency 0.0
Oil 40 deg.API
Water 1.05 Sp.Gr.H2O
Gas 0.71 Sp.Gr.AIR
Acoustic Velocity 1299.73 ft/s
Formation Submergence
Total Gaseous Liquid Column HT (TVD) - * - ft
Equivalent Gas Free Liquid HT (TVD) - * - ft
Acoustic Test



Producing
Annular Gas Flow 0 Mscf/D
% Liquid 100 %
Casing Pressure 0.0 psi (g)
Casing Pressure Buildup - * - psi
Gas/Liquid Interface Pressure - * - min
Liquid Level Depth 2753.49 ft
Pump Intake Depth - * - ft
Formation Depth 2666.00 ft
Pump Intake - * - psi (g)
Producing BHP 1.0 psi (g)
Static BHP - * - psi (g)

Group: MyWells Well: bear 1-18 (acquired on: 02/26/16 15:53:50)



Acoustic Velocity 1299.73 ft/s Joints counted 77
Joints Per Second 20.5005 jts/sec Joints to liquid level 86.8608
Depth to liquid level 2753.49 ft Filter Width 18.0803 22.0803
Automatic Collar Count Yes Time to 1st Collar 0.268 4.024

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

March 01, 2016

Sara Everett
Chesapeake Operating, Inc.
6200 N WESTERN AVE
PO BOX 18496
OKLAHOMA CITY, OK 73118-1046

Re: Temporary Abandonment
API 15-081-20048-00-00
BEAR 1-18
SE/4 Sec.18-28S-32W
Haskell County, Kansas

Dear Sara Everett:

"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 03/01/2017.

- * 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 03/01/2017.

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

Very truly yours,

Michael Maier"