



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

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: <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

CASING MECHANICAL INTEGRITY TEST

DOCKET # D 33012

Disposal Enhanced Recovery:

NW SE SW, Sec 36, T 22 S, R 36 E/A

Repressuring
 Flood
 Tertiary

(689) Feet from South Section Line
(3970) Feet from East Section Line

Date injection started _____
 API #15 - 093 - 21744-0000

Lease Kleeman Well # 2-A
 County Kearny

Operator: Purcell Petroleum LTD Operator License # 5086
 Name & Address 225 N. Market St. Ste 900 Contact Person Walter Phillips
Wichita, KS 67202 Phone 316 263-2243

Max. Auth. Injection Press. _____ psi; Max. Inj. Rate _____ bbl/d;
 If Dual Completion - Injection above production _____ Injection below production _____

Conductor	Surface	Production	Liner	Size	Tubing
Size _____	<u>8 7/8</u>	<u>5 1/2</u>	_____	Size <u>2 3/8</u>	_____
Set at _____	<u>327</u>	<u>2700</u>	_____	Set at <u>1621</u>	_____
Cement Top _____	<u>0</u>	<u>0</u>	_____	Type <u>Bare Steel</u>	_____
" Bottom _____	<u>327</u>	<u>2700</u>	_____	_____	_____
DV/Perf. _____	_____	_____	_____	_____	_____
Packer type <u>Howco tension</u>	_____	_____	_____	_____	_____
Zone of injection <u>Carrietta</u> ft. to ft. <u>1621-1760</u>	_____	_____	_____	_____	_____

TD (and plug back) 2720 (CIBP 4182) ft. depth
 Size 2 3/4 x 5 1/2 Set at 1621
 Perf. or open hole perf

Type Mit: Pressure Radioactive Tracer Survey Temperature Survey

F Time: Start 0 Min. 15 Min. 30 Min.
 I
 E Pressures: 300 300 300 Set up 1 System Pres. during test 0
 L
 D 120 hrs - 300 Set up 2 Annular Pres. during test 300
 D
 A Set up 3 Fluid loss during test 0 bbls.
 T
 A

Tested: Casing or Casing - Tubing Annulus

The bottom of the tested zone is shut in with a packer

Test Date 1-12-14 Using Brady Fluid Svc Company's Equipment

The operator hereby certifies that the zone between 0 feet and 1621 feet

was the zone tested [Signature] Title Region I

The results were Satisfactory , Marginal _____, Not Satisfactory _____
 State Agent Ken Seplik Title PIRT II Witness: Yes No _____
 REMARKS: Initial MIT, Operator plans to file an application to convert this Tail well to a SWD

Origin. Conservation Div.; KDHE/T; Dist. Office;
 Computer Update

NAD 83 GPS 38.09201° N
 101.22598° W

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 16, 2016

WALTER INNES PHILLIPS
Pintail Petroleum, Ltd.
225 N MARKET STE 300
WICHITA, KS 67202-2024

Re: Temporary Abandonment
API 15-093-21744-00-00
KLEEMAN 2 A
SW/4 Sec.36-22S-36W
Kearny County, Kansas

Dear WALTER INNES PHILLIPS:

Your application for Temporary Abandonment (TA) of the above-listed well is denied for the following reasons(s):

Shut-in Over 10 years

In accordance with K.A.R. 82-3-111, this well must be plugged or returned to service by April 15, 2016.

You may file an application for an exception to the 10-year limitation in K.A.R. 82-3-111 to demonstrate why it is necessary to TA the above well for more than (10) years. You must notify the Commission in writing no later than April 15, 2016 of your intention to file the application, and your complete application is due May 15, 2016. All applications and written notifications must be sent to the attention of the Executive Director at the Kansas Corporation Commission Conservation Division at 130 South Market, Room 2078, Wichita, Kansas 67202.

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

Sincerely,

Michael Maier