



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 _____ (depth) Tools in Hole at _____ (depth) 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
(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: _____

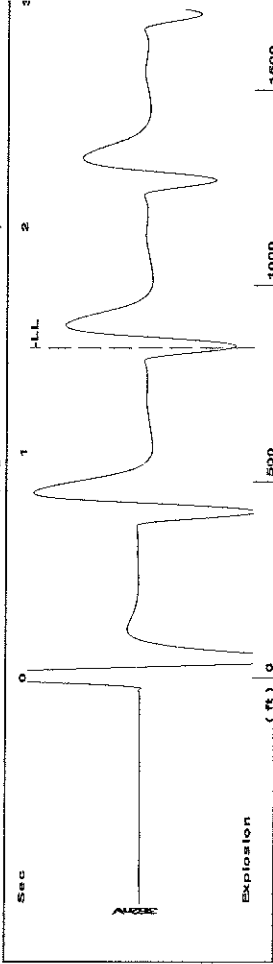
Review Completed by: _____ Comments: _____

TA Approved: Yes Denied Date: _____

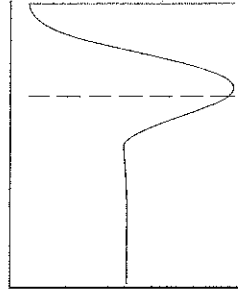
Mail to the Appropriate KCC Conservation Office:

| | | |
|--|---|--------------------|
| | 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: Flinn 2 (acquired on: 03/16/16 16:05:13)



Time 1.462 sec
 Joints 26.5189 Jts
 Depth 840.65 ft



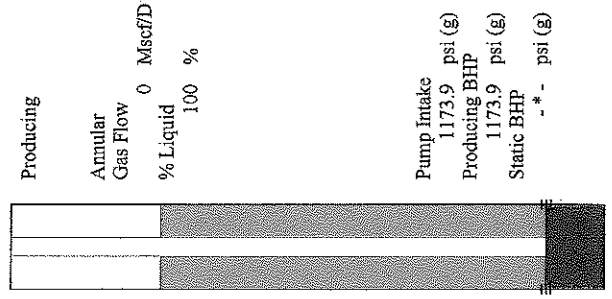
Liquid level calculated with
 user supplied Acoustic Velocity

Acoustic Velocity 1150 ft/s

Analysis Method: Acoustic Velocity

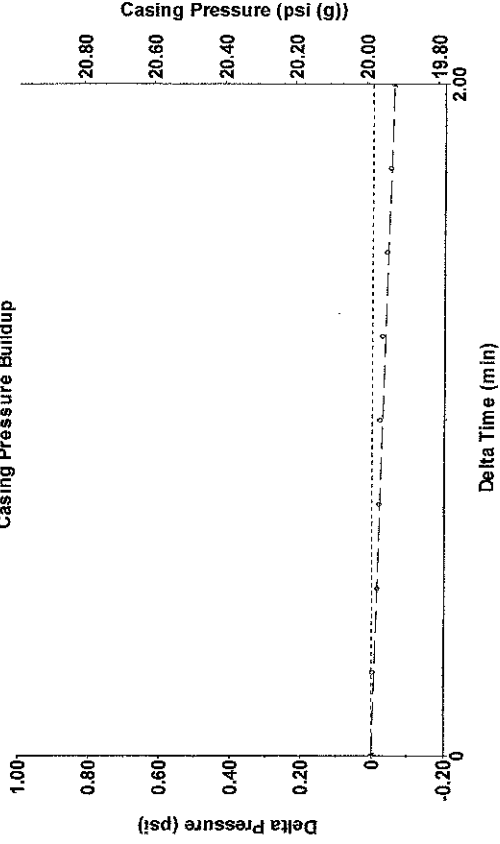
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| | | | |
|-----------------------|----------------|--------------------------------------|---------------|
| Production | Potential | Casing Pressure | 20.0 psi (g) |
| Oil | - * - BBL/D | Casing Pressure Buildup | -0.1 psi |
| Water | - * - BBL/D | Gas/Liquid Interface Pressure | 20.9 psi (g) |
| Gas | - * - Mscf/D | | |
| IPR Method | Vogel | Liquid Level Depth | 840.65 ft |
| PBHP/SBHP | - * - | Pump Intake Depth | 4384.00 ft |
| Production Efficiency | 0.0 | Formation Depth | 4384.00 ft |
| Oil | 40 deg-API | Acoustic Velocity | 1150 ft/s |
| Water | 1.05 Sp.Gr.H2O | Formation Submergence | 3543 ft |
| Gas | 0.85 Sp.Gr.AIR | Total Gaseous Liquid Column HT (TVD) | 3543 ft |
| | | Equivalent Gas Free Liquid HT (TVD) | - * - ft |
| | | Acoustic Test | - * - psi (g) |



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Casing Pressure Buildup



Change in Pressure -0.06 psi PT12865
 Change in Time 2.00 min Range

Group: MyWells Well: Flinn 2 (acquired on: 03/16/16 16:05:13)

Entered Acoustic Velocity for Liquid Level depth determination

Conservation Division
District Office No. 2
3450 N. Rock Road
Building 600, Suite 601
Wichita, KS 67226



Phone: 316-630-4000
Fax: 316-630-4005
<http://kcc.ks.gov/>

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

Sam Brownback, Governor

May 02, 2016

Melody C. Fletcher
Oil Producers, Inc. of Kansas
1710 WATERFRONT PKWY
WICHITA, KS 67206-6603

Re: Temporary Abandonment
API 15-077-21587-00-00
Flinn 2
SW/4 Sec.14-33S-06W
Harper County, Kansas

Dear Melody C. Fletcher:

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

High Fluid Level

In accordance with K.A.R. 82-3-111, this well must be plugged or returned to service by June 01, 2016.

Sincerely,

Steve VanGieson