June 2011 Form must be Typed

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# _____

Address 1:

Address 2:

Phone:(_____) ___

Setting Depth Amount of Cement Top of Cement **Bottom of Cement**

Packer Type: ___

Total Depth:

Geological Date: **Formation Name**

Casing Fluid Level from Surface: ____

Do you have a valid Oil & Gas Lease? Yes No

Contact Person Email: ___

Field Contact Person: ____

Field Contact Person Phone: (_____) ____

Conductor

__ Size: ___

Plug Back Depth: ___

Formation Top Formation Base

_____ At: _____ to _____ Feet

Surface

Form must be signed All blanks must be complete 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 ______ State: _____ Zip: _____ + __ _ _ _ _ GPS Location: Lat: _______(e.g. xx.xxxxx) Datum: NAD27 NAD83 WGS84 _____ Elevation:____ ____ GL KB Lease Name: ___ Well Type: (check one) Oil Gas OG WSW Other: Gas Storage Permit #:____ Spud Date: ___ ___ Date Shut-In: __ Tubing Production Intermediate Liner ___ How Determined? ____ Casing Squeeze(s): _____ to ____ w / ____ sacks of cement, ____ to ____ w / ____ sacks of cement. Date: ___ Depth 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 __ Inch Set at: ___ ___ Plug Back Method: ___ Completion Information ___ At: _____ to _____ Feet Perforation Interval ____ ____to ______ Feet or Open Hole Interval _____ to _____ Feet Perforation Interval _____ to ____ Feet or Open Hole Interval ____ HINDED DENALTY OF DED HIDV I HEDEDY ATTECT THAT THE INFORMATION CONTAINED HEDEIN ICTDIFF AND CODDECT TO THE DECT OF MY VNIOW! EDGE

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 D	enied Date:				

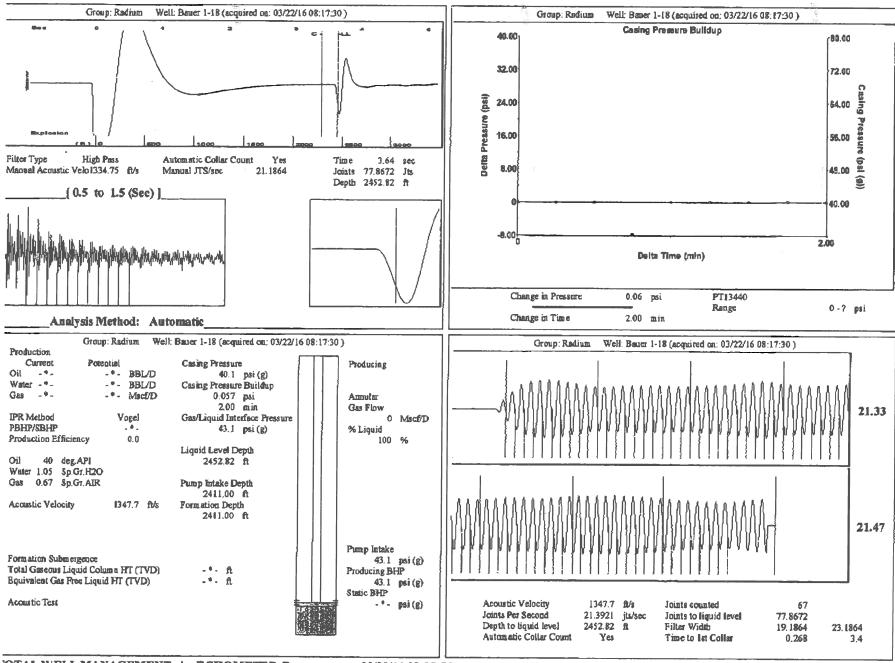
Mail to the Appropriate KCC Conservation Office:



Received Fax

Mar 30 2016 11:32AM

Fax Station :



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/

Sam Brownback, Governor

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

April 12, 2016

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

Re: Temporary Abandonment API 15-185-23221-00-00 BAUER 1-18 NE/4 Sec.18-21S-14W Stafford 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 04/12/2017.
- * 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 04/12/2017.

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

Very truly yours,

Michael Maier"