



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~~

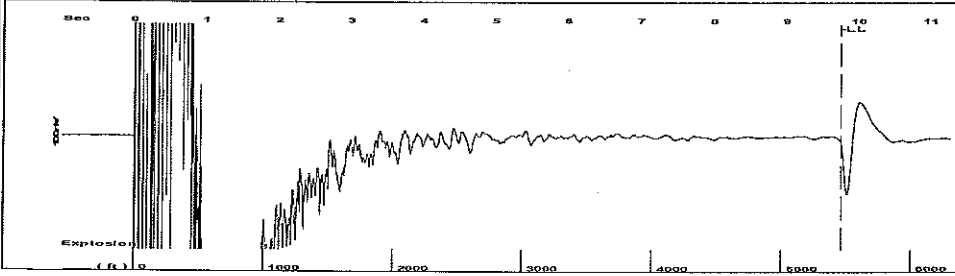
Submitted Electronically

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

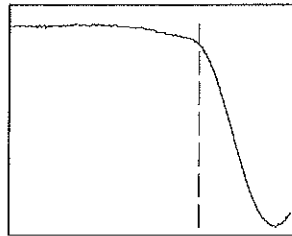
Group: MyWells Well: mlp clawson trust 1-35 (acquired on: 03/24/16 15:45:48)



Time 9.75 sec
 Joints 172.24 Jts
 Depth 5460.00 ft

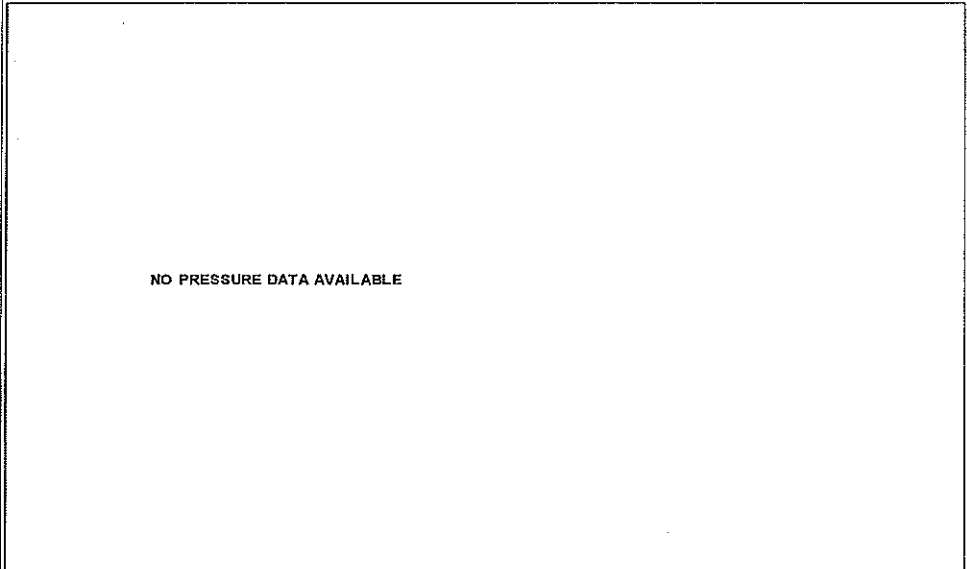
Liquid level calculated with user supplied Acoustic Velocity

Acoustic Velocity 1120 ft/s



Analysis Method: Acoustic Velocity

Group: MyWells Well: mlp clawson trust 1-35 (acquired on: 03/24/16 15:45:48)



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

Group: MyWells Well: mlp clawson trust 1-35 (acquired on: 03/24/16 15:45:48)

Production Current	Potential	Casing Pressure
Oil - * -	- * - BBL/D	0.0 psi (g)
Water - * -	- * - BBL/D	Casing Pressure Buildup
Gas - * -	- * - Mscf/D	- * - psi
		- * - min
IPR Method	Vogel	Gas/Liquid Interface Pressure
PBHP/SBHP	- * -	2.5 psi (g)
Production Efficiency	0.0	
Oil 40 deg.API		Liquid Level Depth
Water 1.05 Sp.Gr.H2O		5460.00 ft
Gas 0.88 Sp.Gr.AIR		Pump Intake Depth
		- * - ft
Acoustic Velocity	1120 ft/s	Formation Depth
		5373.00 ft



Producing
Annular Gas Flow
0 Mscf/D
% Liquid
100 %
Pump Intake
- * - psi (g)
Producing BHP
2.5 psi (g)
Static BHP
- * - psi (g)

Formation Submergence
 Total Gaseous Liquid Column HT (TVD) - * - ft
 Equivalent Gas Free Liquid HT (TVD) - * - ft

Acoustic Test

Group: MyWells Well: mlp clawson trust 1-35 (acquired on: 03/24/16 15:45:48)

Entered Acoustic Velocity for Liquid Level depth determination

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

April 12, 2016

Sara Everett
Chesapeake Operating, LLC
6100 N WESTERN AVE
PO BOX 18496
OKLAHOMA CITY, OK 73118-1046

Re: Temporary Abandonment
API 15-081-21204-00-00
MLP CLAWSON TRUST 1-35
SW/4 Sec.35-29S-34W
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 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"