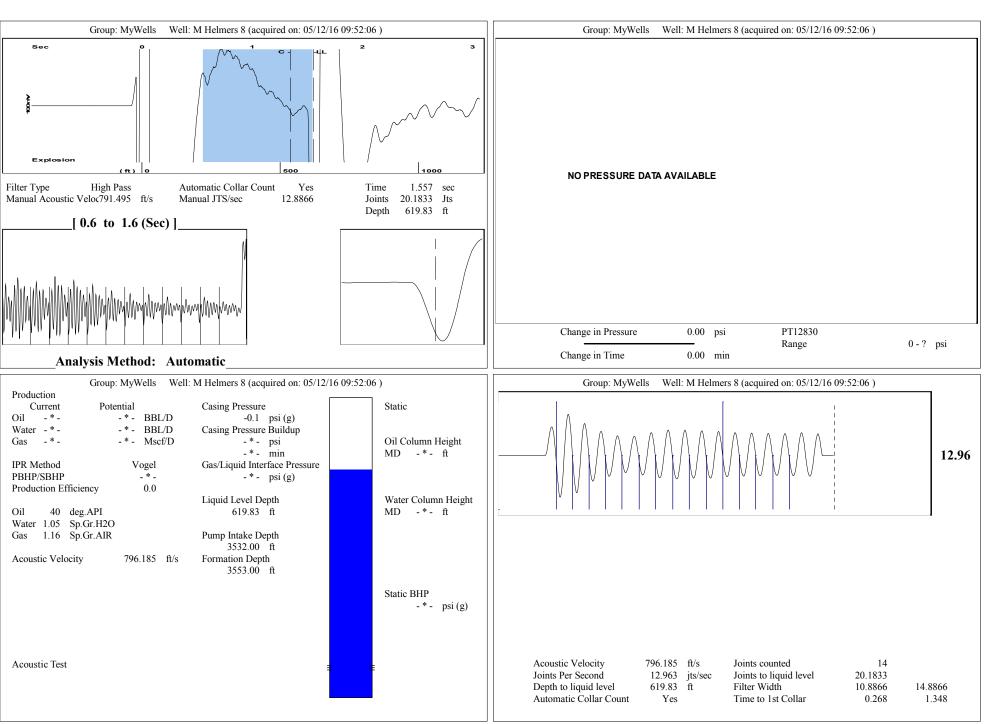
Form CP-111 June 2011 Form must be Typed Form must be signed

## TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

| OPERATOR: License#                             |  |                       |               | API No. 15-                     | ·                  |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
|--|--|-----------------------|---------------|---------------------------------|--------------------|-------------------------|----------------------|-----------|--|--|-----------|---------|-----|----------|--------------|---------------|--------|--|
| Name:  |  |                       |               | Spot Description:               |                    |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
| Address 1:                                     |  |                       |               |                                 | Sec                | Twp S.                  | R                    | E W       |  |  |           |         |     |          |              |               |        |  |
| Address 2:                                     |  |                       |               |                                 |                    | feet from [ ] I         |                      |           |  |  |           |         |     |          |              |               |        |  |
| City:          State:          Contact Person: |  |                       |               | feet from E / W Line of Section |                    |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
|  |  |                       |               | GPS Location: Lat:, Long:       |                    |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
|  |  |                       |               | County: Elevation: GL           |                    |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
|  |  |                       |               | Lease Name:                     |                    |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
|  |  |                       |               |                                 |                    |                         |                      |           |  |  |           |         |     | _        | •            | Date Shut-In: |        |  |
|  |  |                       |               |                                 |                    |                         |                      |           |  |  | Conductor | Surface | Dro | oduction | Intermediate | Liner         | Tuhing |  |
| Size   | Conductor  | Surface               | FIC           | Dauction                        | memediate          | Lillei                  | Tubing               |           |  |  |           |         |     |          |              |               |        |  |
| Setting Depth                                  |  |                       |               |                                 |                    |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
| Amount of Cement                               |  |                       |               |                                 |                    |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
| Top of Cement                                  |  |                       |               |                                 |                    |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
| Bottom of Cement                               |  |                       |               |                                 |                    |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
| Do you have a valid Oil & C  Depth and Type:   | in Hole at [  (depth)  T. I ALT. II Depth of Size: | Tools in Hole at      | w / _<br>Inch | Set at:                         | s of cement Port ( | Collar: ww              |                      | of cement |  |  |           |         |     |          |              |               |        |  |
| Formation Name                                 | Formation Top Formation Base                       |                       |               | Completion Information          |                    |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
| 1  | At:  | to Fee                | t Perfo       | ration Interval                 | to Fe              | eet or Open Hole Interv | val to               | Feet      |  |  |           |         |     |          |              |               |        |  |
| 2  | At:  | to Feet               | t Perfo       | ration Interval                 | to Fe              | eet or Open Hole Interv | val to               | Feet      |  |  |           |         |     |          |              |               |        |  |
| TIMBED DENALTY OF BEI                          | B IIIBV I UEBEBV ATTE                              |                       |               | ctronicall                      |                    | OBBECT TO THE BEST      | OE MA KNOMI E        | :DCE      |  |  |           |         |     |          |              |               |        |  |
| Do NOT Write in This<br>Space - KCC USE ONLY   | Date Tested:                                       | Date Tested: Results: |               |                                 | Date Plugged:      | Date Repaired: Da       | ate Put Back in Serv | /ice:     |  |  |           |         |     |          |              |               |        |  |
| Review Completed by:                           |  |                       | Comn          | nents:                          |                    |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
| TA Approved: Yes                               | Denied Date:                                       |                       |               |                                 |                    |                         |                      |           |  |  |           |         |     |          |              |               |        |  |
|  |  | Mail to the App       | propriate     | KCC Conserv                     | vation Office:     |                         |                      |           |  |  |           |         |     |          |              |               |        |  |

| NAME AND DOOR DAY DOOR DAY DOOR DAYS DAYS WARE WARE THE PARTY DAYS   | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801                      | Phone 620.225.8888 |  |
|--|---|--------------------|--|
| 1000   1000   1000   1   | KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.630.4000 |  |
| The control of the co | KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720                             | Phone 620.432.2300 |  |
| dies trees trees that the large trees tree | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                             | Phone 785.625.0550 |  |



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

May 17, 2016

Jim Farthing Empire Energy E&P, LLC 345 RIVERVIEW ST., STE 540 WICHITA, KS 67203-4262

Re: Temporary Abandonment API 15-185-23315-00-00 HELMERS MARGARET 8 NW/4 Sec.01-22S-12W Stafford County, Kansas

## Dear Jim Farthing:

"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 05/17/2017.

- \* 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 05/17/2017.

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

Very truly yours,

Michael Maier"