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

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| DPERATOR: License#   |                                      |                     |              | API No. 15-  |  |   |            |                 |        |                            |              |            |  |        |  |
|--|--------------------------------------|---------------------|--------------|--|--|---|------------|-----------------|--------|----------------------------|--------------|------------|--|--------|--|
| Name:  |                                      |                     |              | Spot Descri  | ption:   |   |            |                 |        |                            |              |            |  |        |  |
| Address 1:   |                                      |                     |              |  | Sec  | Twp   | _ S. R     | E               | W      |                            |              |            |  |        |  |
| Address 2:   |                                      |                     |              |  |  |   | = =        | =               |        |                            |              |            |  |        |  |
| City:        State:        Contact Person:        Phone:        Contact Person Email:  |                                      |                     |              |  |  |   |            |                 |        |                            |              |            |  |        |  |
|  |                                      |                     |              |  |  |   |            |                 |        | Field Contact Person:      |              |            |  |        |  |
|  |                                      |                     |              |  |  |   |            |                 |        | Field Contact Person Phone |              |            |  |        |  |
|  |                                      |                     |              |  |  |   |            |                 |        |                            |              |            |  |        |  |
|  |                                      |                     |              |  |  |   |            |                 |        | Spud Date.                 |              | Date Shut- |  |        |  |
|  | Conductor                            | Surface             | Pro          |  |  |   |            |                 |        | duction                    | Intermediate | Liner      |  | Tubing |  |
| Size   |                                      |                     |              |  |  |   |            |                 |        |                            |              |            |  |        |  |
| Setting Depth  |                                      |                     |              |  |  |   |            |                 |        |                            |              |            |  |        |  |
| Amount of Cement   |                                      |                     |              |  |  |   |            |                 |        |                            |              |            |  |        |  |
| Top of Cement  |                                      |                     |              |  |  |   |            |                 |        |                            |              |            |  |        |  |
| Bottom of Cement   |                                      |                     |              |  |  |   |            |                 |        |                            |              |            |  |        |  |
| Casing Squeeze(s):  (top)  Do you have a valid Oil & G.  Depth and Type:  Junk if  J | as Lease? Yes   n Hole at (depth)  I | No Tools in Hole at | Perfor       | sing Leaks: sacks Set at: sacks Plug Back Methor ration Interval ration Interval | Yes No Depth s of cement Port C Fee  Completion to Fee  to Fee | of casing leak(s): Collar: (depth) t Information set or Open Hole | w /        | sack of co      | ement  |                            |              |            |  |        |  |
|  |                                      | Submitt             | ed Ele       | ctronically  | y  |   |            |                 |        |                            |              |            |  |        |  |
| Do NOT Write in This Space - KCC USE ONLY Review Completed by:   | Date Tested:                         | R                   | esults: Comm | nents:   | Date Plugged:  | Date Repaired:  | Date Put f | 3ack in Service | :<br>— |                            |              |            |  |        |  |
| TA Approved: Yes   | Denied Date:                         |                     |              |  |  |   |            |                 |        |                            |              |            |  |        |  |
|  |                                      | Mail to the App     | ropriate l   | CC Conserv   | ration 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 |
| Similar Street S | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                             | Phone 785.625.0550 |

Conservation Division District Office No. 4 2301 E. 13th Street Hays, KS 67601-2651



Phone: 785-625-0550 Fax: 785-625-0564 http://kcc.ks.gov/

Sam Brownback, Governor

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

June 07, 2016

Sara Guthrie Citation Oil & Gas Corp. 14077 CUTTEN RD PO BOX 690688 HOUSTON, TX 77269-0688

Re: Temporary Abandonment API 15-065-22846-00-00 CLACK A 4 SW/4 Sec.10-09S-21W Graham County, Kansas

## Dear Sara Guthrie:

"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 06/07/2017.

- \* 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 06/07/2017.

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

Very truly yours,

**RICHARD WILLIAMS"**