



TEMPORARY ABANDONMENT WELL APPLICATION

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

CASING MECHANICAL INTEGRITY TEST

DOCKET # 0-17197.0

Disposal Enhanced Recovery:

Repressuring
 Flood
 Tertiary

Date injection started _____
 API #15 - 083-20324-00-00

SW-NW-NW, Sec 21, T 22 S, R 21

4566 (41603) Feet from South Section Line
 4557 (4537) Feet from East Section Line

Lease Mooney D Well # 2 SWD
 County Hodgeman

Operator: Pickrell Drilling Co., Inc.
 Name & Address 100 S. Main, Ste. 505

Operator License # 5123

Contact Person Ed Mondoro

Wichita, KS 67202-3738

Phone 785-798-7496

Max. Auth. Injection Press. ^(vac) 300 psi; Max. Inj. Rate ⁽⁷⁰⁾ 200 bbl/d;
 If Dual Completion - Injection above production _____ Injection below production _____

	Conductor	Surface	Production	Liner	Tubing
Size		<u>8 7/8"</u>	<u>5 1/2"</u>		Size <u>2 3/8"</u>
Set at		<u>249'</u>	<u>4386'</u>		Set at <u>3790'</u>
Cement Top		<u>0</u>	<u>app 3500'</u>		Type <u>plastic lined</u>
" Bottom		<u>249'</u>	<u>4386'</u>		
DV/Perf.			TD (and plug back) <u>4393 (4020)</u>		ft. depth <u>perk</u>
Packer type	<u>Baker AD-1</u>		Size <u>2 3/8" x 5 1/2"</u>		Set at <u>3790'</u>
Zone of injection	<u>Lansing</u>	ft. to ft. <u>3905-3915</u>			Perf. or open hole <u>perk</u>

Type Mit: Pressure Radioactive Tracer Survey Temperature Survey

F Time: Start 0 Min. 15 Min. 30 Min.
 I Pressures: 310# 305# 305# Set up 1 System Pres. during test 0
 L Set up 2 Annular Pres. during test 310-325
 D Set up 3 Fluid loss during test 0 bbls
 D Tested: Casing or Casing - Tubing Annulus

The bottom of the tested zone is shut in with a packer

Test Date 3/27/13 Using Pickrell Drilling Co., Inc. Company's Equipment

The operator hereby certifies that the zone between 0 feet and 3790 feet was the zone tested
Ed Mondoro Signature Lead Foreman Title

The results were Satisfactory , Marginal _____, Not Satisfactory _____
 State Agent Eric MacLaren Title PIRT II Witness: Yes No _____
 REMARKS: Retest in 5 years.

Origin. Conservation Div.; KDHE/T; Dist. Office;
 Computer Update GPS-38,12913°N, 99.64053°W KCC Form U-7 6/8

GPS entered

AWY

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

June 27, 2016

Dave Pauly
Pickrell Drilling Company, Inc.
100 S MAIN STE 505
WICHITA, KS 67202-3738

Re: Temporary Abandonment
API 15-083-20324-00-00
MOONEY D 2
NW/4 Sec.21-22S-21W
Hodgeman County, Kansas

Dear Dave Pauly:

"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 06/27/2017.

- * 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 06/27/2017.

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

Very truly yours,

Michael Maier"