



**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

<b>Do NOT Write in This Space - KCC USE ONLY</b>	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

PRECISION WIRELINE and TESTING  
P.O. BOX 560  
LIBERAL, KANSAS 67905-0560  
620-629-0204

PRODUCER PIONEER OIL COMPANY  
WELL NAME ALEXANDER #1  
LOCATION SW 27-27S-34W  
COUNTY HASKELL STATE KS

CSG \_\_\_\_\_ WT \_\_\_\_\_ SET @ \_\_\_\_\_ TD \_\_\_\_\_ PB \_\_\_\_\_ GL \_\_\_\_\_  
TBG \_\_\_\_\_ WT \_\_\_\_\_ SET @ \_\_\_\_\_ SN \_\_\_\_\_ PKR \_\_\_\_\_ KB \_\_\_\_\_  
PERFS \_\_\_\_\_ TO \_\_\_\_\_, \_\_\_\_\_ TO \_\_\_\_\_, \_\_\_\_\_ TO \_\_\_\_\_, \_\_\_\_\_ TO \_\_\_\_\_  
PROVER \_\_\_\_\_ METER \_\_\_\_\_ TAPS \_\_\_\_\_ ORIFICE \_\_\_\_\_ PCR \_\_\_\_\_ TCR \_\_\_\_\_  
GG \_\_\_\_\_ API \_\_\_\_\_ @ \_\_\_\_\_ GM \_\_\_\_\_ RESERVOIR \_\_\_\_\_

DATE TIME OF READING	ELAP TIME HOUR	WELLHEAD PRESSURE DATA						MEASUREMENT DATA				LIQUIDS		TYPE	INITIAL	SPEICAL	ENDING	
		CSG PSIG	$\Delta$ P CSG	TBG PSIG	$\Delta$ P TBG	BHP PSIG	$\Delta$ P BHP	PRESS PSIG	DIFF.	TEMP	Q MCFD	COND BBLs.	WATER BBLs.	TEST:	ANNUAL	RETEST	DATE	<u>7-19-16</u>
REMARKS PERTINENT TO TEST DATA QUALITY																		
TUESDAY																		
7-19-16																		ASSUME AVERAGE JT. LENGTH = 31.50'
1000		86.2		PUMP OFF														CONDUCT LIQUID LEVEL DETERMINATION TEST
																		SHOT
																		JTS TO
																		DISTANCE
																		#
																		FLUID
																		TO FLUID
																		1
																		86.0
																		2709'
																		2
																		86.0
																		2709'

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

August 02, 2016

Brandi Stennett  
Pioneer Oil Company, Inc.  
400 Main Street  
P.O. Box 237  
Vincennes, IN 47591

Re: Temporary Abandonment  
API 15-081-20216-00-00  
ALEXANDER 1  
SW/4 Sec.27-27S-34W  
Haskell County, Kansas

Dear Brandi Stennett:

"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 08/02/2017.

- \* 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 08/02/2017.

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

Very truly yours,

Michael Maier"