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

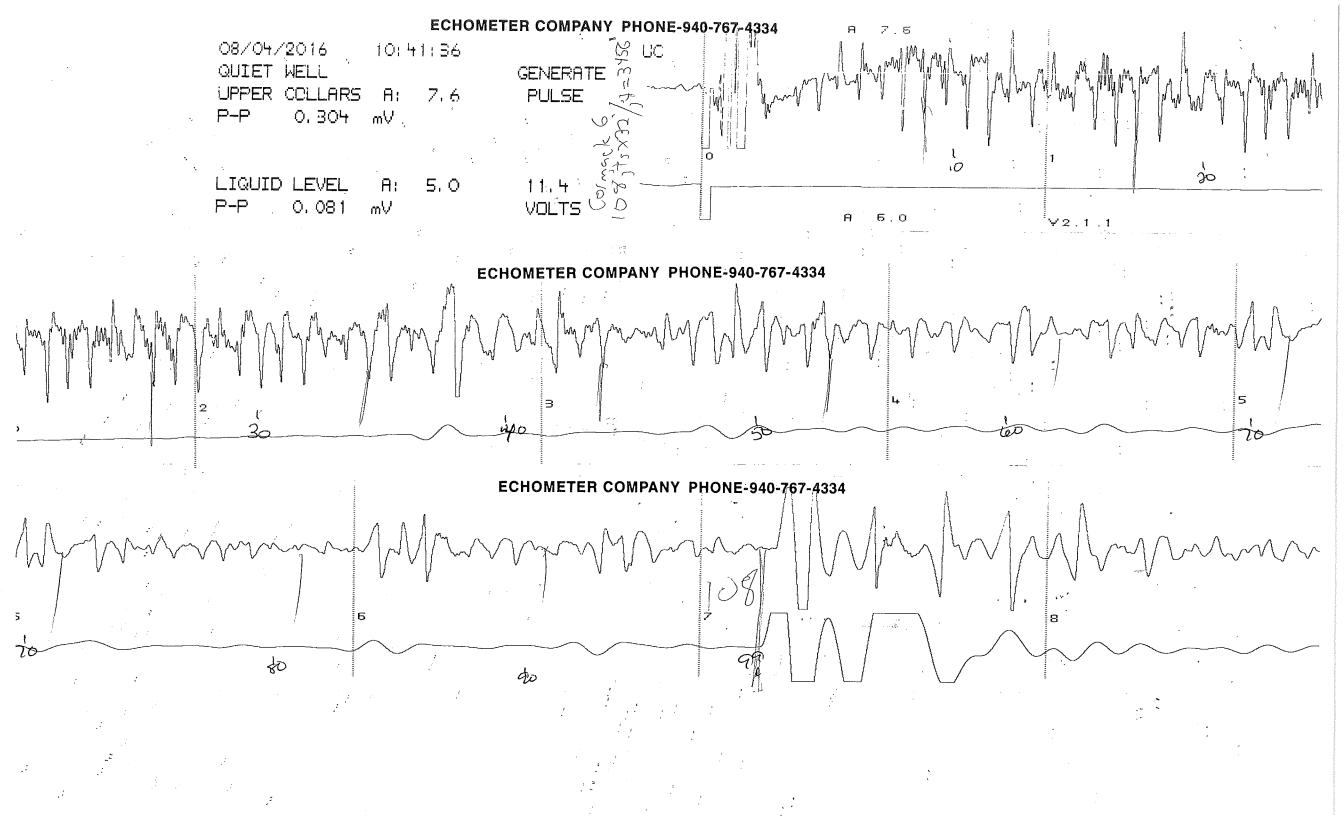
All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

| PERATOR: License# | API No. 15 Spot Description: | | | | | | | | | | |
|--|--|---|---|-------------------|-----------------------|--|-----------------|-----------------|------|--|--|
| lame: | | | | | | | | | | | |
| Address 1: | | | | | Sec. | Twp | S. R | | E W | | |
| Address 2: | | | | | | feet fr | = | = | | | |
| City: | feet from E / W Line of Section | | | | | | | | | | |
| Contact Person: | GPS Location: Lat:, Long:, Long: | | | | | | | | | | |
| Phone:() | County: Elevation: GL KB | | | | | | | | | | |
| Contact Person Email: | Lease Name: | | | | | | | | | | |
| ield Contact Person: | | | | | | | | | | | |
| | | | | | | | | | | | |
| ield Contact Person Phone: () | | | | | Gas Storage Permit #: | | | | | | |
| | | | | Spud Date: | | Date S | snut-In: | | | | |
| | Conductor | Surface | Pro | oduction | Intermediate | e L | iner | Tubing | | | |
| Size | | | | | | | | | | | |
| Setting Depth | | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | | |
| Top of Cement | | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | | |
| Casing Fluid Level from Surficasing Squeeze(s): (top) To you have a valid Oil & Gate of the Casing Squeeze(s): (top) To you have a valid Oil & Gate of the Casing Squeeze(s): Depth and Type: Junk in Casing Squeeze(s): Packer Type: Total Depth: Geological Date: Formation Name | to w / w | sacks of No Tools in Hole at f: DV Tool: (dep | cement, depth) Ca th) w / _ th) Inch | to to | Yes No Do | sacks of epth of casing lead ort Collar: (dept.) | cement. Date | e: | | | |
| | At: | to Fe | eet Perfo | ration Interval _ | to | _ Feet or Open H | lole Interval | to | Feet | | |
| | At: | to Fe | eet Perfo | ration Interval _ | to | Feet or Open H | łole Interval _ | to | Feet | | |
| INDED DENALTY OF DED | IIIDV I LIEDEDV ATTE | | RATION CO | | |) COBBECT TO T | UE BEST AF | MAN INTONNI E | DOE | | |
| Do NOT Write in This Space - KCC USE ONLY | Date Tested: Results: | | | | Date Plugged | : Date Repaire | ed: Date Pi | ut Back in Serv | ice: | | |
| Review Completed by: | | | Comn | nents: | | | | | | | |
| TA Approved: Yes | Denied Date: | | | | | | | | | | |
| | | Moil to the A | nnron-iot- | KCC Cancaru | ation Office: | | | | | | |

Mail to the Appropriate KCC Conservation Office:

| There had been too the too and held took took took took took took took too | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | Phone 620.225.8888 |
|--|---|--------------------|
| There has been and be to the same the s | 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 |
| Name Name Name | 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

September 20, 2016

Brett Blazer BEREXCO LLC 2020 N. Bramblewood Wichita, KS 67206-1094

Re: Temporary Abandonment API 15-055-21694-00-00 Cormack 6 SW/4 Sec.34-22S-34W Finney County, Kansas

Dear Brett Blazer:

- "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 09/20/2017.
- * 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 09/20/2017.

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

Very truly yours,

Michael Maier"