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

All blanks must be complete

Phone 620.225.8888

Phone 316.630.4000

Phone 620.432.2300

Phone 785.625.0550

TEMPORARY ABANDONMENT WELL APPLICATION

| DPERATOR: License# | | | | API No. 15- Spot Description: | | | | | | | | | | | | | |
|---|--------------------------------|------------------|---------------|--------------------------------|----------------|-----------------------------|------------|---------------------------|-------------------------|--|---------------------|--|---|-----|-----|------|--|
| | | | | | | | | | Address 1: | | | | | Sec | Twp | S. R | |
| State: Zip: + Contact Person: Phone: | | | | | | | | | | | | | | | | | |
| | | | | | | | | | Contact Person Email: | | Lease Name: Well #: | | | | | | |
| | | | | | | | | | rield Contact Person:) | | | | Well Type: (check one) Oil Gas OG WSW Other: SWD Permit #: ENHR Permit #: Gas Storage Permit #: | | | | |
| | | | | | | | | | | | | | | | | | |
| | Conductor | Surface | Pro | oduction | Intermediate | Liner | | Tubing | | | | | | | | | |
| Size | | | | | | | | | | | | | | | | | |
| Setting Depth | | | | | | | | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | | | | | | | | |
| Top of Cement | | | | | | | | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | | | | | | | | |
| Oo you have a valid Oil & Garage Depth and Type: Junk if Type Completion: ALT. Packer Type: Otal Depth: | n Hole at [I ALT. II Depth o | Tools in Hole at | w / _ Inch | sacks | of cement Port | Collar:(depth) | | | | | | | | | | | |
| Geological Date: | | | | | | | | | | | | | | | | | |
| ormation Name Formation Top Formation Base | | | | Completion Information | | | | | | | | | | | | | |
| | At: | to Fee | t Perfo | ration Interval _ | to F | Feet or Open Hole | Interval | to Feet | | | | | | | | | |
| | At: | to Fee | t Perfo | ration Interval – | to F | Feet or Open Hole | Interval | toFeet | | | | | | | | | |
| INDED DENALTY OF BED | HIDV I LIEDEDV ATTE | | | ctronically | | PARREATTA THE D | DEST OF MV | VAIOMII EDGE | | | | | | | | | |
| Do NOT Write in This Space - KCC USE ONLY | Date Tested: Results | | Results: | | Date Plugged: | nte Plugged: Date Repaired: | | Date Put Back in Service: | | | | | | | | | |
| Review Completed by: | | | Comn | nents: | | | | | | | | | | | | | |
| TA Approved: Yes | Denied Date: | | | | | | | | | | | | | | | | |
| | | Mail to the Ap | propriate | KCC Conserv | ation Office: | | | | | | | | | | | | |

KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801

KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720

KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651

KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226

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

October 04, 2016

Kevin Wiles SR American Warrior, Inc. PO BOX 399 GARDEN CITY, KS 67846

Re: Temporary Abandonment API 15-109-21419-00-00 FAIRLEIGH O 1 SW/4 Sec.01-15S-33W Logan County, Kansas

Dear Kevin Wiles SR:

- "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 10/04/2017.
- * 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 10/04/2017.

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

Very truly yours,

Richard Williams"