



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

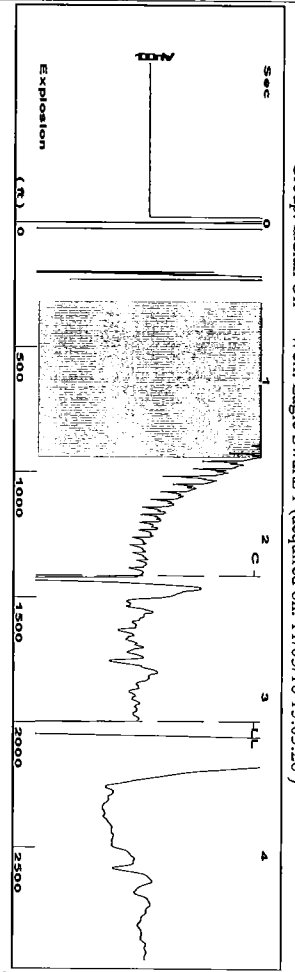
Submitted Electronically

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: _____					

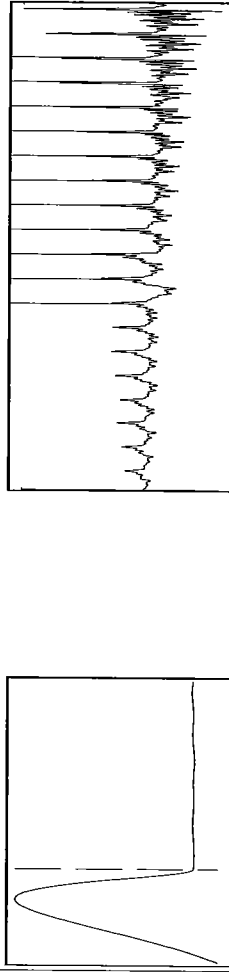
Mail to the Appropriate KCC Conservation Office:

	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 620.225.8888
	KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226	Phone 316.337.7400
	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

Group: Indian Oil Well: Eagle Swartz 1 (acquired on: 11/03/16 15:03:26)



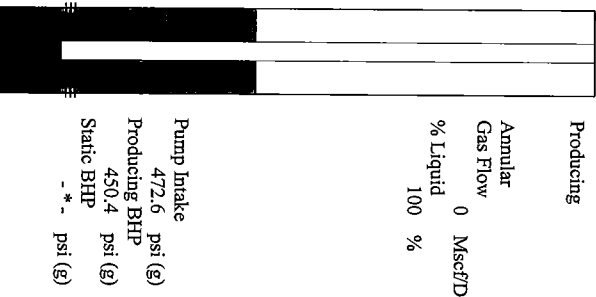
Filter Type High Pass
Manual Acoustic Velo 1255.45 ft/s
Automatic Collar Count Yes
Manual JTS/sec 19.802
Time 3.157 sec
Joints 62.9463 J/s
Depth 1995.40 ft



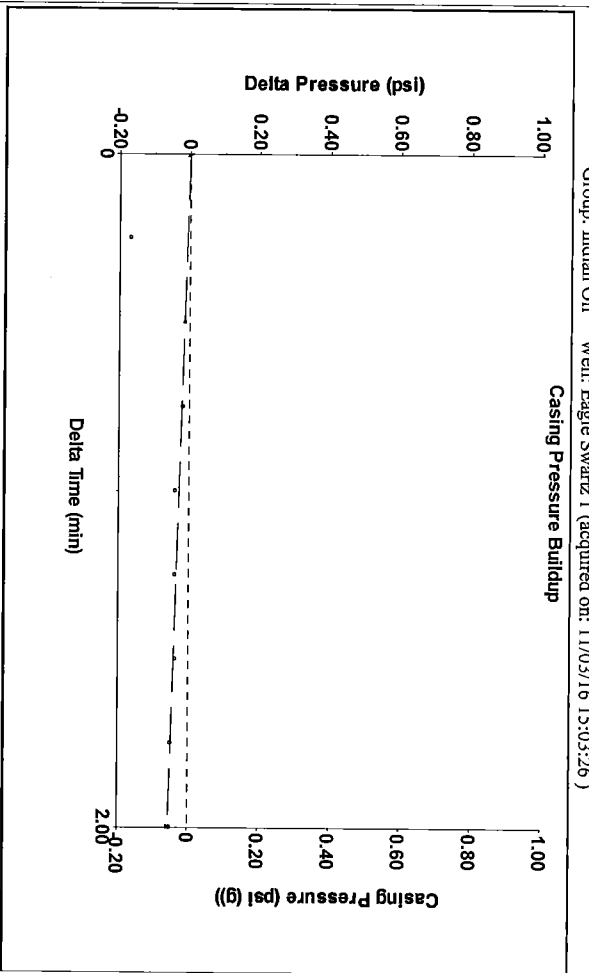
Analysis Method: Automatic

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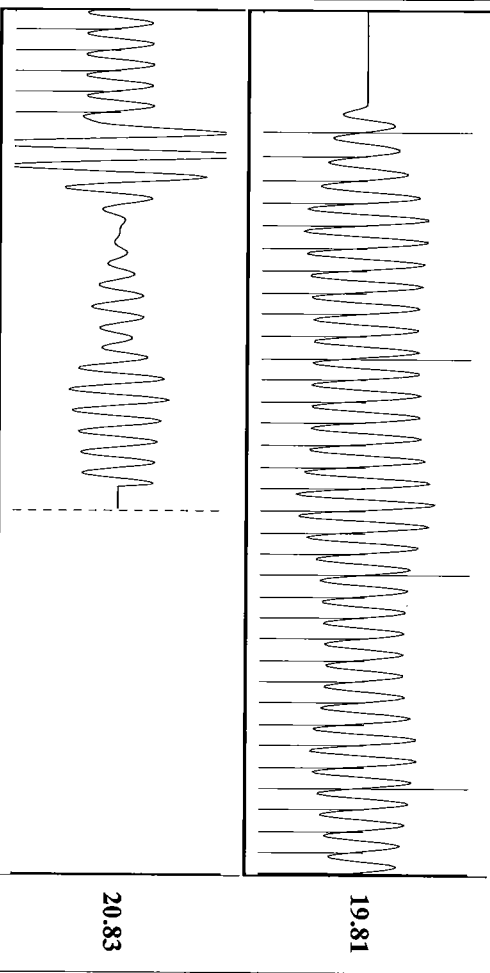
Production	Potential	Casing Pressure	Producing
Oil -*- BBL/D	-0.0 psi (g)	Annular Gas Flow	0 Mscf/D
Water -*- BBL/D	-0.055 psi	% Liquid	100 %
Gas -*- Mscf/D	2.00 min		
IPR Method PBHP/SBHP	Vogel -*-	Gas/Liquid Interface Pressure	0.7 psi (g)
Production Efficiency	0.0	Liquid Level Depth	1995.40 ft
Oil 40 deg API		Pump Intake Depth	3400.00 ft
Water 1.05 Sp.Gr.H2O		Formation Depth	3332.00 ft
Gas 0.73 Sp.Gr.AIR			
Acoustic Velocity	1264.11 ft/s		
Formation Submergence			
Total Gaseous Liquid Column HT (TVD)	1405 ft		
Equivalent Gas Free Liquid HT (TVD)	1405 ft		
Acoustic Test_01_110316			



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Acoustic Velocity	1264.11 ft/s	Joints counted	39
Joints Per Second	19.9387 JTS/sec	Joints to liquid level	62.9463
Depth to liquid level	1995.4 ft	Filter Width	17.802
Automatic Collar Count	Yes	Time to 1st Collar	0.28

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

November 08, 2016

Joscelyn Nittler
Indian Oil Co., Inc.
PO BOX 209
2507 SE US 160 HWY
MEDICINE LODGE, KS 67104-0209

Re: Temporary Abandonment
API 15-007-21148-00-01
Swartz 1
NE/4 Sec.31-31S-11W
Barber County, Kansas

Dear Joscelyn Nittler:

"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 11/08/2017.

- * 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 11/08/2017.

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

Very truly yours,

Michael Maier"