Form CP-111 Oct 2016 Form must be Typed Form must be signed

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

| OPERATOR: License# | | | | API No. 15- | | | | | | | | | | | | | | | | |
|---|----------------------|-------------------|------------|-------------------|---------------|----------------------|---------------|--------------|----------|---------------------------------|-----------|---------|-----|---------|--|-------|-----|--------|--|--|
| Name: | | | | Spot Description: | | | | | | | | | | | | | | | | |
| Address 1: | | | | | Sec | Twp | S. R | [] E | ≣ | | | | | | | | | | | |
| Address 2: State: Zip: + Contact Person: | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | Field Contact Person Phone: () | | | | | SWD Permit #: ☐ ENHR Permit #: Gas Storage Permit #: ☐ | | | | | |
| | | | | | | | | | | | | | | _ | | | ln: | | | |
| | | | | | | | | | | | | | l _ | | | | | | | |
| | | | | | | | | | | 0: | Conductor | Surface | Pro | duction | Intermediate | Liner | | Tubing | | |
| | | | | | | | | | | Size | | | | | | | | | | |
| Setting Depth Amount of Cement | | | | | | | | | | | | | | | | | | | | |
| Top of Cement | | | | | | | | | | | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | | | | | | | | | | | |
| | I | | | | | | | | | | | | | | | | | | | |
| Casing Fluid Level from Surfa | | | | | | | | | | | | | | | | | | | | |
| Casing Squeeze(s): | to w / | sacks of ce | ement, | to | (bottom) W / | sacks of cen | nent. Date: _ | | | | | | | | | | | | | |
| Do you have a valid Oil & Ga | s Lease? Yes | No | | | | | | | | | | | | | | | | | | |
| Depth and Type: | Hole at | Tools in Hole at | Ca: | sing Leaks: | Yes No Dept | h of casing leak(s): | | | | | | | | | | | | | | |
| | | | | | | | | | f cement | | | | | | | | | | | |
| Type Completion: ALT. I | | | | | | | | odok o | | | | | | | | | | | | |
| Packer Type: | | | | | | | | | | | | | | | | | | | | |
| Total Depth: | Plug Bacl | C Depth: | | Plug Back Meth | od: | | | | | | | | | | | | | | | |
| Geological Date: | | | | | | | | | | | | | | | | | | | | |
| Formation Name | Formation 1 | op Formation Base | | | Completio | n Information | | | | | | | | | | | | | | |
| 1 | At: | to Feet | Perfo | ration Interval | to F | eet or Open Hole | Interval | to | Feet | | | | | | | | | | | |
| 2 | At: | to Feet | Perfo | ration Interval - | to F | eet or Open Hole | Interval | to | Feet | | | | | | | | | | | |
| LINDED DENALTY OF BED | IIIDVIIIEDEDV ATTE | | TION 001 | ITAINED HED | | 00050770 TUE | | | 205 | | | | | | | | | | | |
| TIMBED BENIALTY AE BED | IIIBV I BEBEBV XIIIE | | | | | ABBEATTATEL | SECT AL IN | O DRIMAN E | INAL | | | | | | | | | | | |
| | | Submitt | ed Ele | ctronicall | y | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| Do NOT Write in This Space - KCC USE ONLY | Date Tested: | Results: | | | Date Plugged: | Date Repaired: | Date Put | Back in Serv | ice: | | | | | | | | | | | |
| Review Completed by: | | | Comm | nents: | | | | | | | | | | | | | | | | |
| TA Approved: Yes | | | | | | | | | | | | | | | | | | | | |
| "TAPPIOVEG. 165 | | | | | | | | | | | | | | | | | | | | |
| | | Mail to the App | ropriate I | CC Conserv | ation Office: | | | | | | | | | | | | | | | |

| NAME AND DOOR DAY DOOR DAY DOOR DAYS DAYS WARE WARE THE PARTY DAYS | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | Phone 620.225.8888 |
|--|--|--------------------|
| 1000 1000 1000 1 | KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.337.7400 |
| The state of the s | KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720 | Phone 620.432.2300 |
| dies trees trees that the large trees tree | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651 | Phone 785.625.0550 |

Conservation Division District Office No. 3 1500 W. Seventh Chanute, KS 66720



Phone: 620-432-2300 Fax: 620-432-2309 http://kcc.ks.gov/

Sam Brownback, Governor

Jay Scott Emler, Chairman Shari Feist Albrecht, Commissioner Pat Apple, Commissioner

November 17, 2016

REX R. ASHLOCK Colt Energy Inc PO BOX 388 IOLA, KS 66749-0388

Re: Temporary Abandonment API 15-125-31687-00-00 HINKLE 12-3 SW/4 Sec.03-33S-17E Montgomery County, Kansas

Dear REX R. ASHLOCK:

- "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 11/17/2017.
- * 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 11/17/2017.

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

Very truly yours,

Russell Hine"