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

## TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

Country   Service   Serv	OPERATOR: License#				API No. 15-						
	Name:				Spot Descr	iption:					
State   Zip:	Address 1:										
Contact Person:	Address 2:										
Datum:   NAD27   NAD83   WS84	City:	State:	Zip: +								
Country	Contact Person:				(e.g. xx.xxxxx) (e.g. xxxxxxxx)						
Well Type: (check one)						County: Elevation: GL KB					
Gas Storage Permit #:	Contact Person Email:				Lease Nam	e:		_ Well #:			
Gas Storage Permit #:   Date Shut-In:     Spud Date:   Date Shut-In:     Size	Field Contact Person:										
Spud Date:	Field Contact Person Phon	e: ( )			l —			R Permit #:			
Size											
Size Setting Depth Amount of Cement Dot Cement Bottom of		0 1 1	0 (								
Setting Depth	Cino	Conductor	Surrace	Pro	oduction	Intermediate	Liner		Tubing		
Amount of Cement    Bottom of Cement   Bottom of Ce											
Top of Cement    Bottom of Cement   Bottom of Cemen											
Bottom of Cement  Casing Fluid Level from Surface:											
Casing Squeeze(s):	•										
Geological Date:  Formation Name  Formation Top Formation Base  Completion Information  At:	Type Completion: ALT	.I ALT. II Depth of	of: DV Tool:(depth)	w/_	sacks	s of cement Port	t Collar:(depth)			f cement	
Formation Name  Formation Top Formation Base  Completion Information  At:	Total Depth:	Plug Bad	ck Depth:		Plug Back Method:						
At: to Feet Perforation Interval to Feet or Open Hole Interval to	Geological Date:										
At: to Feet Perforation Interval to Feet or Open Hole Interval to	Formation Name	Formation	Top Formation Base			Completi	on Information				
Submitted Electronically  Do NOT Write in This	1	At:	to Feet	Perfo	ration Interval	to	Feet or Open Hole	Interval	to	Feet	
Submitted Electronically  Do NOT Write in This Space - KCC USE ONLY  Review Completed by: Comments:  TA Approved: Yes Denied Date:	2	At:	to Feet	Perfo	ration Interval	to	Feet or Open Hole	Interval	to	Feet	
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Space - KCC USE ONLY  Review Completed by: Comments:  TA Approved:											
TA Approved: Yes Denied Date:				Date Plugged: Date Repaired: Date Put Back in Service:							
	Review Completed by:			Comn	nents:						
	TA Approved: Yes	Denied Date:									
Mail to the Appropriate KCC Conservation Office:			Mail to the App	ropriate	KCC 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	
Similar Street S	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

November 15, 2016

Catherine Smith Quinque Operating Company 908 NW 71ST ST OKLAHOMA CITY, OK 73116-7402

Re: Temporary Abandonment API 15-189-20949-00-00 BAKER 2-3 NW/4 Sec.03-35S-35W Stevens County, Kansas

## Dear Catherine Smith:

"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 11/15/2017.

- \* 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 11/15/2017.

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

Very truly yours,

Michael Maier"