



# 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

<b>Do NOT Write in This Space - KCC USE ONLY</b>	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

# LEASE INSPECTION FORM

(Also to be used when shooting fluid levels)

WF

Routing-Top: Division Engineer	<input checked="" type="checkbox"/>
Production Tech	<input checked="" type="checkbox"/>
Production Assistant	<input checked="" type="checkbox"/>
Well File	<input checked="" type="checkbox"/>
Bottom: Field Office	<input checked="" type="checkbox"/>

Foremen should attempt to perform annually a lease inspection on every lease in his division.  
Foremen should perform annually at least one inspection with each pumper in his division and obtain pumper's signature:

Lease Name: Pfeifer B

Foreman Name: C. Gabel

Date: 8-29-16

Pumper Name: \_\_\_\_\_

Date: \_\_\_\_\_

**WELL EVALUATION**

Well #	Well #	Well #	Well #
1			

<b>TIME CLOCK</b>			
In the well on time clock? Y/N			
# of hours on per day			
<b>BARREL TEST</b>			
When last taken? A, B, C, or D (see below)			
Test with 5 gallon bucket or barrel			
Total fluid			
% Oil			
BOPD			
Does barrel need replaced? Y/N			
Comments:			
STROKE LENGTH (measured)			
STROKES PER MINUTE			
<b>FLUID POUND</b>			
Can you feel a fluid pound? Y/N			
If yes, where in the stroke? PT, PM, PB			
Is pound Very Hard (VH), Hard (H), Soft (S) or Very Soft (VS)			
Comments:			
<b>FLUID LEVEL</b>			
Joints to perfs			
Joints to fluid	607'		
Joints in hole			
Comments:			
<b>CIRCULATING SYSTEM</b>			
Any air leaks in the casing? Y/N			
Did you drop a barrel of fluid to test for casing air leaks? Y/N			
Is circulation system air tight? Y/N			
Is the casing vent installed crooked, the gas vent chappel holes plugged or the ball and seat on the gas vent in need of repair? Y/N			
Comment:			
<b>DOES PUMP HOLD PRESSURE? Y/N</b>			
Comment on pressure and bleed off:			
<b>LEADLINE</b>			
Pressure (psig)			
Does check valve need replaced? Y/N			
Do any valves need to be opened or closed for proper operations? Y/N			

Well #	Well #	Well #	Well #

<b>PUMPING UNIT</b>			
Type			
Size			
Is gearbox oil level low? Y/N (Pull dipstick)			
Any water or metal shavings in the oil? Y/N (pull drain plug)			
Are all bearings on the unit greased? Y/N (Random test by lubricating with a grease gun)			
Is any bearing on the unit in need of repair? Y/N			
Is either wrist pin visibly in need of repair? Y/N			
Do stuffing box rubbers need adjusted or replaced? Y/N			
Comments:			
<b>ENGINE OR MOTOR (including belts and sheaves)</b>			
Type			
Size & design			
Horsepower			
Sheave diameter			
Sheave shaft diameter			
RPMs (measured)			
Carburetor Pressure (ounces)			
Unusual Noises? Y/N			
Do belts need tightened? Y/N			
Does water or oil need to be added? Y/N			
Is sheave worn and need changed? Y/N			
Are wiring protective devices and magneto and spark plug covers adequate, any bearings loose and/or rough; or does the clutch need to be greased, or are any other repairs needed? Y/N			
Comments:			
<b>PANEL</b>			
Heater Coil Size			
Fuse Size			
Starter Size			
<b>UNIT BALANCE</b>			
Amps up			
Amps middle			
Amps down			

**LEASE EVALUATION**

Does gun barrel, heater treater, salt water tank or stock tanks leak or seep oil? Y/N \_\_\_\_\_

Take amp reading on cathodic protection. Gun barrel: \_\_\_\_\_ Heater-Treater \_\_\_\_\_ Water knockout: \_\_\_\_\_

Any work necessary to properly seal or net the top of the SW tank? Y/N \_\_\_\_\_

Are repairs to walkways, handrails, or ladders needed on any of the production or treating equipment? Y/N \_\_\_\_\_

Any loose insulation on production or treating equipment? Y/N \_\_\_\_\_

Are oil levels OK in the saltwater pumps on the lease? Y/N \_\_\_\_\_

Are there any leaks or spills that require attention on the lease? Y/N \_\_\_\_\_

Is there trash or junk that needs to be removed from any location on the lease? Y/N (be specific) \_\_\_\_\_

Is dilke sufficient? Y/N \_\_\_\_\_

**CHEMICAL INVENTORY:** Use a barrel gauge to estimate the amount of chemical in each open drum.

Type: \_\_\_\_\_

Amount: (drums) \_\_\_\_\_ gal \_\_\_\_\_ gal \_\_\_\_\_ gal \_\_\_\_\_ gal

Amount: (bulk) \_\_\_\_\_ gal \_\_\_\_\_ gal \_\_\_\_\_ gal \_\_\_\_\_ gal

Location: \_\_\_\_\_

Was the barrel gauge used to estimate the amount of chemical in the open drums? Y/N \_\_\_\_\_

**JOB REVIEW AND OTHER COMMENTS (List any work done on the lease, any work that needs to be done or any other comments.)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If well is on a time clock, barrel test and fluid level status should be taken. If possible, after running the well on hand for at least 12 hours, if the well will not over pump. Fluid pound and balance status should be determined before putting the well on hand and/or just prior to the end of a time clock cycle.

- A. Just prior to end of time clock cycle in normal operation.
- B. Number of minutes or hours in time clock cycle?
- C. After well had been left on hand for \_\_\_\_\_ hours.
- D. Well is not on a time clock.

ECHOMETER COMPANY  
5001 DITTO LANE WICHITA FALLS, TEXAS 76802

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/>

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

Sam Brownback, Governor

December 21, 2016

Andrew Moore  
BEREXCO LLC  
2020 N. BRAMBLEWOOD  
WICHITA, KS 67206-1094

Re: Temporary Abandonment  
API 15-051-02985-00-00  
PFEIFER B LEASE 1  
NW/4 Sec.05-14S-17W  
Ellis County, Kansas

Dear Andrew Moore:

Your application for Temporary Abandonment (TA) for the above-listed well is denied for the following reasons(s):

**High Fluid Level**

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by January 18, 2017.

**This deadline does NOT override any compliance deadline given to you in any Commission Order.**

You may contact me if you have any questions.

Sincerely,  
Richard Williams  
KCC DISTRICT 4