



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

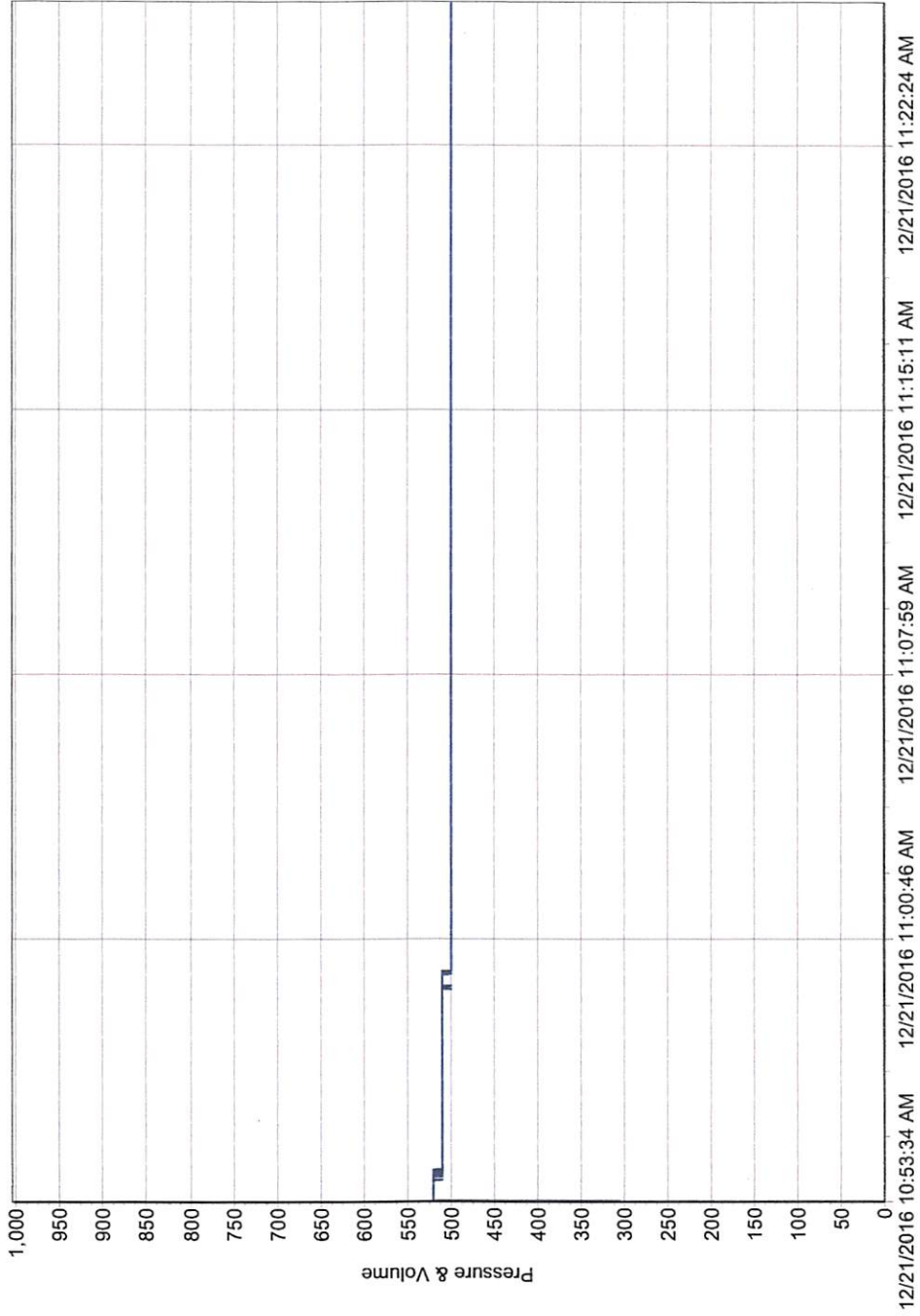
Do NOT Write in This Space - KCC USE ONLY	Date Tested: _____	Results: _____	Date Plugged: _____	Date Repaired: _____	Date Put Back in Service: _____
	Review Completed by: _____ Comments: _____				
TA Approved: <input type="checkbox"/> Yes <input type="checkbox"/> Denied Date: _____					

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

carla swd

— Total Pressure



CASING MECHANICAL INTEGRITY TEST

DOCKET # 0-31368.0

Disposal Enhanced Recovery:

NW-SW-SW-SW Sec 1, T 29 S, R 22

Repressuring
Flood
Tertiary

499 (514) Feet from South Section Line
152 FWL (5170) Feet from East Section Line

Date injection started Oct. 2012
API #15 - 057-20835-09-01

Lease Karla SWD 2922 Well # 1-1
County Ford

Operator: Sand Ridge Exploration & Production Ltd. Operator License # 34192
Name &
Address 123 Robert S. Kern Ave. Contact Person Michael Sauer
Oklahoma City, OK 73102 Phone 405-435-2108

Max. Auth. Injection Press. (0) psi; Max. Inj. Rate (0) bbl/d;
If Dual Completion - Injection above production _____ Injection below production _____
Conductor Surface Production Liner Tubing
Size 20" 9 5/8" 7" _____ Size 4 1/2"
Set at 146' 1006' 6154' _____ Set at 6231'
Cement Top 0 0 4340' _____ Type J-55 IPC
" Bottom 146' 1006' 6154' _____
DV/Perf. _____ TD (and plug back) 7042 ft. depth
Packer type AC-1X Size 7" x 4 1/2" Set at 6231'
Zone of injection Achuckle ft. to ft. 6251-7042 Perf. or open hole open hole

Type Mit: Pressure Radioactive Tracer Survey Temperature Survey
10:53 520#

F Time: Start 10 Min. 20 Min. 30 Min.

I
E Pressures: 500# 500# 500# Set up 1 | System Pres. during test 0
L Set up 2 | Annular Pres. during test 520-500#
D Set up 3 | Fluid loss during test 0 bbls.

D
A Tested: Casing or Casing - Tubing Annulus

The bottom of the tested zone is shut in with a packer

Test Date 10/21/16 Using Brian's Hot Oil Service Company's Equipment

The operator hereby certifies that the zone between 0 feet and 6231 feet
was the zone tested [Signature] Signature Title

The results were Satisfactory , Marginal , Not Satisfactory
State Agent Eric MacLaren Title ECRS Witness: Yes No
REMARKS: Well is not in use. MIT is for TA purposes. 5 year retest. Approve CP-111.

Origin. Conservation Div.; KDHE/T; Dist. Office; SA
 Computer Update GPS/37.54315°N, -99.68414°W KCC Form U-7 6/84

12/27/16
SCANNED
GPS entered

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

January 03, 2017

Spence Laird
SandRidge Exploration and Production LLC
123 ROBERT S. KERR AVE
OKLAHOMA CITY, OK 73102-6406

Re: Temporary Abandonment
API 15-057-20835-00-01
KARLA SWD 2922 1-1
SW/4 Sec.01-29S-22W
Ford County, Kansas

Dear Spence Laird:

"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 01/03/2018.

- * 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 01/03/2018.

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

Very truly yours,

Michael Maier"