1329273

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

TEMPORARY ABANDONMENT WELL APPLICATION

Form must be Typed Form must be signed All blanks must be complete

| OPERATOR: License# | | | | API No. 15 | | | | | | | | | | | | | | | |
|---|---|---------------------|----------------|--|---|------------------------------|-------------|--------------------------------|--|------|-----------|---------|-----|----------|---|-------|--|--------|--|
| Name: | | | | Spot Description: | | | | | | | | | | | | | | | |
| | | | | Sec Twp S. R EW | | | | | | | | | | | | | | | |
| | | | | feet from N / S Line of Section | | | | | | | | | | | | | | | |
| | | | | feet from L E / L W Line of Section | | | | | | | | | | | | | | | |
| | | | | GPS Location: Lat: | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | ☐ Gas Storage Permit #: Date Shut-In: | | | | |
| | | | | | | | | | | | | | I | | | | | | |
| | | | | | | | | | | | Conductor | Surface | Pro | oduction | Intermediate | Liner | | Tubing | |
| | | | | | | | | | | Size | | | | | | | | | |
| Setting Depth | | | | | | | | | | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | | | | | | | | | | |
| Top of Cement Bottom of Cement | | | | | | | | | | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | | | | | | | | | | |
| Casing Squeeze(s): (top) Do you have a valid Oil & Ga Depth and Type: Junk in Type Completion: ALT. Packer Type: ALT. Total Depth: Geological Date: Formation Name 1. 2. ERBORNATY OF BER | as Lease? Yes n Hole at (depth) I ALT. II Depth o Size: Plug Bac Formation At: At: | No Tools in Hole at | w / Inch Perfo | sing Leaks: sack: sack: Set at: Plug Back Meth ration Interval | Yes No Depth s of cement Port C Fee Completion to Fee to Fee | of casing leak(s): _ collar: | _ w / | sack of cement to Feet to Feet | | | | | | | | | | | |
| | | Submitt | ea Ele | ctronicall | У | | | | | | | | | | | | | | |
| Do NOT Write in This Space - KCC USE ONLY | Date Tested: | Results: | | | Date Plugged: | Date Repaired: | Date Put Ba | ack in Service: | | | | | | | | | | | |
| Review Completed by: | | | Comm | nents: | | | | | | | | | | | | | | | |
| TA Approved: Yes | Denied Date: | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| | | Mail to the App | ropriate I | KCC Conserv | vation Office: | | | | | | | | | | | | | | |

| There have been not only be and not been made been been been been been been been be | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | Phone 620.225.8888 |
|---|--|--------------------|
| State | 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 |
| See | 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

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

January 24, 2017

Beth Oswald Dart Cherokee Basin Operating Co., LLC 600 DART RD PO BOX 177 MASON, MI 48854-0177

Re: Temporary Abandonment API 15-125-31537-00-00 D MILLER A4-35 NE/4 Sec.35-34S-15E Montgomery County, Kansas

Dear Beth Oswald:

"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 01/24/2018.

- * 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 01/24/2018.

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

Very truly yours,

Duane Sims"