1329670

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:                   |  |                           |                |         |        |  |  |
| Address 1:                                   |                        |                      |             |                                     | · Sec.   | Twp                       | _ S. R         | [] E    | W      |  |  |
| Address 2:                                   |                        |                      |             |                                     |  | feet from                 |                |         |        |  |  |
| City:  |                        |                      |             | feet from ☐ E / ☐ W Line of Section |  |                           |                |         |        |  |  |
| Contact Person:                              |                        |                      |             | GPS Location: Lat:                  |  |                           |                |         |        |  |  |
| Phone:()                                     |                        |                      |             | County:                             |  |                           |                |         |        |  |  |
| Contact Person Email:                        |                        |                      |             |                                     | Lease Name: Well #:                                    |                           |                |         |        |  |  |
| Field Contact Person:                        |                        |                      |             |                                     | Well Type: (check one)  Oil  Gas  OG  WSW  Other:      |                           |                |         |        |  |  |
| Field Contact Person Phone: ( )              |                        |                      |             |                                     | SWD Permit #: ENHR Permit #:                           |                           |                |         |        |  |  |
| ,  |                        |                      |             |                                     | Gas Storage Permit #: Date Shut-In:                    |                           |                |         |        |  |  |
|  | Conductor              | Surface              | Pro         | duction                             | Intermediate   | Liner                     |                | Tubing  |        |  |  |
| Size   |                        |                      |             |                                     |  |                           |                |         |        |  |  |
| Setting Depth                                |                        |                      |             |                                     |  |                           |                |         |        |  |  |
| Amount of Cement                             |                        |                      |             |                                     |  |                           |                |         |        |  |  |
| Top of Cement                                |                        |                      |             |                                     |  |                           |                |         |        |  |  |
| Bottom of Cement                             |                        |                      |             |                                     |  |                           |                |         |        |  |  |
| Depth and Type:                              | T. I ALT. II Depth o   | f: DV Tool:(depth)   | w /<br>Inch | Set at:                             | s of cement Po   | rt Collar:(depth)<br>Feet |                |         | cement |  |  |
| Geological Date:                             |                        |                      |             |                                     |  |                           |                |         |        |  |  |
| Formation Name Formation Top Formation Base  |                        |                      |             | Completion Information              |  |                           |                |         |        |  |  |
| 1  | At:                    | to Feet              | Perfo       | ration Interval                     | to   | Feet or Open Hole In      | nterval        | to      | Feet   |  |  |
| 2  | At:                    | to Feet              | Perfo       | ration Interval                     | to   | Feet or Open Hole In      | ıterval        | . to    | Feet   |  |  |
| IINDED DENALTY OF DE                         | D IIIDV I LIEDEDV ATTE |                      |             | ctronicall                          |  | CODDECT TO THE D          | ECT OF MAY I/M | JOWI EF | VCE    |  |  |
| Do NOT Write in This<br>Space - KCC USE ONLY | Date Tested:           | ate Tested: Results: |             |                                     | Date Plugged: Date Repaired: Date Put Back in Service: |                           |                |         |        |  |  |
| Review Completed by:                         |                        |                      | Comn        | nents:                              |  |                           |                |         | _      |  |  |
| TA Approved: Yes                             | Denied Date:           |                      |             |                                     |  |                           |                |         |        |  |  |
|  |                        | Mail to the App      | ropriate    | KCC Conserv                         | ation Office:  |                           |                |         |        |  |  |
|  |                        |                      |             |                                     |  |                           |                |         | $\neg$ |  |  |

| Street State Cases was take the new Acad Sangar water was the large  | 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 |  |
| 100 100 100 100 100 100 100 100 100 100  | KCC District Office #3 - 1500 SW Seventh Steet, Chanute, KS 66720                      | Phone 620.432.2300 |  |
| Size that the first part of the part of the the the part of the pa | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                      | Phone 785.625.0550 |  |

Conservation Division District Office No. 2 3450 N. Rock Road Building 600, Suite 601 Wichita, KS 67226



Phone: 316-337-7400 Fax: 316-630-4005 http://kcc.ks.gov/

Sam Brownback, Governor

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

January 25, 2017

Jon F. Messenger Messenger Petroleum, Inc. 525 S MAIN ST KINGMAN, KS 67068-1968

Re: Temporary Abandonment API 15-077-20742-00-03 MCINTIRE B 1 NW/4 Sec.01-31S-08W Harper County, Kansas

## Dear Jon F. Messenger:

"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 01/25/2018.

- \* 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 01/25/2018.

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

Very truly yours,

Steve VanGieson"