KANSAS CORPORATION COMMISSION

OIL & GAS CONSERVATION DIVISION

Form CP-111 July 2017 Form must be Typed Form must be signed All blanks must be complete

1331658

## **TEMPORARY ABANDONMENT WELL APPLICATION**

| OPERATOR: License# Name: Address 1:                                 |                    |                      |           | API No. 15                   |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
|---|--------------------|----------------------|-----------|------------------------------|----------------|---------------------------|--------|-----------|--|-----------------------|--|--|--|--|--|--------------------|--|--|
|   |                    |                      |           | Spot Description:            |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
|   |                    |                      |           | Sec Twp S. R E [] W          |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
| Address 2:  |                    |                      |           |                              |                | feet from N /             |        |           |  |                       |  |  |  |  |  |                    |  |  |
| City:        Zip:       +          Contact Person:         Phone:() |                    |                      |           |                              |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
|   |                    |                      |           |                              |                |                           |        |           |  | Contact Person Email: |  |  |  |  |  | Well #:            |  |  |
|   |                    |                      |           |                              |                |                           |        |           |  | Field Contact Person: |  |  |  |  |  | Gas 🗌 OG 🗌 WSW 🗌 O |  |  |
| Field Contact Person Phor   | ne:()              |                      |           | SWD Permit #: ENHR Permit #: |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
|   | ()                 |                      |           |                              | rage Permit #: |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
|   |                    |                      |           | Spud Date:                   |                | Date Shut-In:             |        |           |  |                       |  |  |  |  |  |                    |  |  |
|   | Conductor          | Surface              | Pro       | duction                      | Intermediate   | Liner                     | Tubing | 3         |  |                       |  |  |  |  |  |                    |  |  |
| Size  |                    |                      |           |                              |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
| Setting Depth   |                    |                      |           |                              |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
| Amount of Cement  |                    |                      |           |                              |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
| Top of Cement   |                    |                      |           |                              |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
| Bottom of Cement  |                    |                      |           |                              |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
| Casing Fluid Level from Su  | Irface:            | How Det              | termined? |                              |                | Dat                       | e:     |           |  |                       |  |  |  |  |  |                    |  |  |
| Casing Squeeze(s):  |                    |                      |           |                              |                |                           | e:     |           |  |                       |  |  |  |  |  |                    |  |  |
| Do you have a valid Oil & O   | Gas Lease? 🗌 Yes [ | No                   |           |                              |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
| Depth and Type: 🗌 Junk  | in Hole at [       | Tools in Hole at     | Cas       | sing Leaks:                  | Yes No Depth   | of casing leak(s):        |        |           |  |                       |  |  |  |  |  |                    |  |  |
| Type Completion:  |                    |                      |           |                              |                |                           |        | of cement |  |                       |  |  |  |  |  |                    |  |  |
| Packer Type:  |                    |                      |           |                              |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
| Total Depth:  |                    |                      |           |                              |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
| Geological Date:  |                    |                      |           |                              |                |                           |        |           |  |                       |  |  |  |  |  |                    |  |  |
| Formation Name  | Formation          | Top Formation Base   |           |                              | Completion     | Information               |        |           |  |                       |  |  |  |  |  |                    |  |  |
| 1   |                    | •                    | Dorfor    | otion Intonyal               | •              |                           | to     | Foot      |  |                       |  |  |  |  |  |                    |  |  |
| 2   |                    |                      |           |                              |                | et or Open Hole Interval_ |        |           |  |                       |  |  |  |  |  |                    |  |  |
| ζ   | At:                | IU FEEI              | Perior    | auon mterväl -               |                |                           |        | ——reei    |  |                       |  |  |  |  |  |                    |  |  |
| INDED DENALTY OF DE   |                    | EGT TUAT TUE INFORMA |           |                              |                | DECTTOTUE DECT OF         |        | IDOE      |  |                       |  |  |  |  |  |                    |  |  |

## Submitted Electronically

| <i>Do NOT Write in This<br/>Space -</i> KCC USE ONLY | Date Tested: | Results:  | Date Plugged: | Date Repaired: | Date Put Back in Service: |
|--|--------------|-----------|---------------|----------------|---------------------------|
| Review Completed by:                                 |              | Comments: |               |                |                           |
| TA Approved: 🗌 Yes 🗌 D                               | enied Date:  |           |               |                |                           |

## Mail to the Appropriate KCC Conservation Office:

|  | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | Phone 620.682.7933   |                    |  |
|--|--|--|--------------------|--|
|  |  | KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.337.7400 |  |
|  | KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720              | Phone 620.902.6450   |                    |  |
|  | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651        | Phone 785.261.6250   |                    |  |



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

Pat Apple, Chairman Shari Feist Albrecht, Commissioner Jay Scott Emler, Commissioner Sam Brownback, Governor

September 11, 2017

Ear M. Knighton, Jr Knighton Oil Company, Inc. 1700 N WATERFRONT PKY BLDG 100 STE A WICHITA, KS 67206

Re: Temporary Abandonment API 15-191-21487-00-01 NOFSINGER OWWO 1 NE/4 Sec.34-32S-02E Sumner County, Kansas

Dear Ear M. Knighton, Jr:

"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 09/11/2018.

\* 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 09/11/2018.

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

Very truly yours,

Dan Fox"