KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION** 

Form CP-111 Oct 2016 Form must be Typed Form must be signed All blanks must be complete

1339809

## **TEMPORARY ABANDONMENT WELL APPLICATION**

| OPERATOR: License#          |                                 |                      |               | API No. 15-           | API No. 15  |                          |        |           |  |
|-----------------------------|---------------------------------|----------------------|---------------|-----------------------|---|--------------------------|--------|-----------|--|
| Name:                       |                                 |                      |               |                       | Spot Description:   |                          |        |           |  |
| Address 1:                  |                                 |                      |               | _                     | Sec   | Twp S. R                 |        | E 🗌 W     |  |
| Address 2:                  |                                 |                      |               | _                     |   | feet from N /            | 4      |           |  |
| City:                       | State:                          | Zip:                 | _ +           | - CPS Locatio         | feet from E / W Line of Section   |                          |        |           |  |
| Contact Person:             |                                 |                      |               |                       | GPS Location: Lat: , Long:    Datum:  NAD27    NAD27  NAD83    WGS84    County: |                          |        |           |  |
|                             |                                 |                      |               |                       |   |                          |        |           |  |
| Contact Person Email:       |                                 |                      |               |                       |   | Well #:                  |        |           |  |
| Field Contact Person:       |                                 |                      |               | Well Type: (a         | check one) 🗌 Oil 🗌 🤇  | Gas OG WSW Othe          | er:    |           |  |
| Field Contact Person Phone  | e:()                            |                      |               |                       |   | ENHR Permit #:           |        |           |  |
|                             | Field Contact Person Phone: ( ) |                      |               |                       | Gas Storage Permit #: Date Shut-In:   |                          |        |           |  |
|                             |                                 |                      |               | 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 Su  | rface:                          |                      | How Determine | ed?                   |   | Date: _                  |        |           |  |
| -                           |                                 |                      |               |                       |   | sacks of cement. Date:   |        |           |  |
|                             | _                               |                      |               | (top) (               | (bottom)  |                          |        |           |  |
| Do you have a valid Oil & G | as Lease? 🔄 Yes                 | No                   |               |                       |   |                          |        |           |  |
| Depth and Type: Unk         | in Hole at                      | Tools in Hole        | at            | Casing Leaks:         | Yes No Depth  | of casing leak(s):       |        |           |  |
|                             |                                 |                      |               |                       |   | ollar: w /               |        | of cement |  |
| Packer Type:                |                                 |                      |               |                       |   |                          |        |           |  |
| Total Depth:                |                                 |                      |               |                       |   |                          |        |           |  |
| Geological Date:            |                                 |                      |               |                       |   |                          |        |           |  |
| Geological Date.            |                                 | n Top Formation      | Base          |                       | Completion  | Information              |        |           |  |
| Formation Name              | Formatio                        | in top i officiation |               |                       |   |                          |        |           |  |
| Formation Name              |                                 | ·                    | Feet Pe       | erforation Interval _ | toFee   | et or Open Hole Interval | to     | Feet      |  |

## Submitted Electronically

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



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

February 27, 2017

R. A. (Dick) Schremmer Bear Petroleum, LLC PO BOX 438 HAYSVILLE, KS 67060-0438

Re: Temporary Abandonment API 15-191-00794-00-00 KNOWLTON C 1 SE/4 Sec.18-33S-02E Sumner County, Kansas

Dear R. A. (Dick) Schremmer:

"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 02/27/2018.

\* 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 02/27/2018.

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

Very truly yours,

Dan Fox-ECRS"