1346432

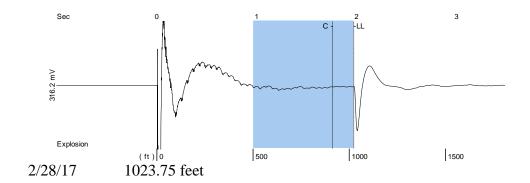
Form CP-111 Oct 2016 Form must be Typed Form must be signed

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

| OPERATOR: License# | DPERATOR: License# | | | | API No. 15- | | | | | |
|--|---------------------|----------------------|----------|---|--|-------------------------|---------------|----------|--|----------|
| Name: | | | | Spot Description: | | | | | | |
| Address 1: | | | | | Sec | Twp | _ S. R | _ | | |
| Address 2: | | | | | | feet from | = = | | | |
| City: + | | | | | | | | | | |
| | | | | | | | | | | Phone:() |
| 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: | | | | | | |
| | | | | Opud Date. | | Date Gridt-iii | | | | |
| | Conductor | Surface | Pro | oduction | Intermediate | Liner | | Tubing | | |
| Size | | | | | | | | | | |
| Setting Depth | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | |
| Top of Cement | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | |
| Depth and Type: | .I ALT. II Depth o | f: DV Tool:(depth) | w / _ | Set at: | s of cement Por | t Collar:(depth) eet | | | | |
| Coological Data: | | | | | | | | | | |
| Geological Date: | Farmatian | To Secretica Dece | | | 0 | | | | | |
| Formation Name | | Top Formation Base | Df- | | • | on Information | -t-mi-l | | | |
| l | | to Feet | | | | Feet or Open Hole In | | | | |
| <u> </u> | At: | to Feet | Perro | ration interval. | 10 | Feet or Open Hole In | itervai t | toFeet | | |
| INDED DENALTY OF BEE | IIIDV I LEDEBV ATTE | CT TUAT TUE INICODMA | TION CO | NITAINED LIEB | EIN ICTOLIE AND | CORRECT TO THE R | ECT OF MV I/N | OWI EDGE | | |
| | | Submitte | ed Ele | ctronicall | у | | | | | |
| Do NOT Write in This Space - KCC USE ONLY | Date Tested: | ested: 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 | vation Office: | | | | | |
| | | | | | | | | | | |

| There have been one one one one one one one of the best of the best one | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | Phone 620.225.8888 | |
|--|--|--------------------|--|
| Since | 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 | |
| Since Street State | 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

March 16, 2017

Pam Baker Camio Enterprises, LLC PO BOX 308 AUGUSTA, KS 67010

Re: Temporary Abandonment API 15-173-20571-00-01 ROYAL 1 SE/4 Sec.36-25S-01W Sedgwick County, Kansas

Dear Pam Baker:

- "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 03/16/2018.
- * 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 03/16/2018.

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

Very truly yours,

Dan Fox"