



TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 Contact Person Email: _____
 Field Contact Person: _____
 Field Contact Person Phone: (_____) _____

API No. 15- _____
 Spot Description: _____
 _____ - _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ E W
 _____ feet from N / S Line of Section
 _____ feet from E / W Line of Section
 GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)
 Datum: NAD27 NAD83 WGS84
 County: _____ Elevation: _____ GL KB
 Lease Name: _____ Well #: _____
 Well Type: (check one) Oil Gas OG WSW Other: _____
 SWD Permit #: _____ ENHR Permit #: _____
 Gas Storage Permit #: _____
 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 Surface: _____ How Determined? _____ Date: _____
 Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
(top) (bottom) (top) (bottom)
 Do you have a valid Oil & Gas Lease? Yes No
 Depth and Type: Junk in Hole at _____ Tools in Hole at _____ Casing Leaks: Yes No Depth of casing leak(s): _____
(depth) (depth)
 Type Completion: ALT. I ALT. II Depth of: DV Tool: _____ w / _____ sacks of cement Port Collar: _____ w / _____ sack of cement
(depth) (depth)
 Packer Type: _____ Size: _____ Inch Set at: _____ Feet
 Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name	Formation Top	Formation Base	Completion Information
1. _____	At: _____ to _____ Feet	Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet	
2. _____	At: _____ to _____ Feet	Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet	

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Do NOT Write in This Space - KCC USE ONLY	Date Tested: _____	Results: _____	Date Plugged: _____	Date Repaired: _____	Date Put Back in Service: _____
	Review Completed by: _____ Comments: _____				
TA Approved: <input type="checkbox"/> Yes <input type="checkbox"/> 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

CASING MECHANICAL INTEGRITY TEST

DOCKET # E-28,978.1

Disposal Enhanced Recovery:

SE NW SW, Sec 35, T 32 S, R 40 E

Repressuring
Flood
Tertiary

1250 (1407) Feet from South Section Line
2000 (4058) Feet from East Section Line

Date injection started _____
API #15 -129 - 21017-00-01

Lease SERU Well # 24-1
County NAPLTON

Operator: MERIT ENERGY Co.
Name & Address 13727 NOEL RD, STE 500
DALLAS, TX 75240

Operator License # 32446
Contact Person BRAD COLEMAN
Phone (622) 655-1118

Max. Auth. Injection Press. 1800 psi; Max. Inj. Rate 3500 bbl/d;
If Dual Completion - Injection above production _____ Injection below production _____

	Conductor	Surface	Production	Liner	Size	Tubing
Size		<u>8 5/8"</u>	<u>4 1/2"</u>		<u>2 3/8"</u>	
Set at		<u>1495'</u>	<u>5394'</u>		<u>5100'</u>	
Cement Top		<u>0</u>	<u>4448'</u>		Type	<u>DUBLWED</u>
" Bottom		<u>1495'</u>	<u>5394'</u>			
TD/Perf. <u>C 2575</u>			TD (and plug back)	<u>5625 (5394)</u>		ft. depth
Packer type <u>ARROW SET UK</u>			Size <u>2 3/8" x 1 1/2"</u>	Set at <u>5100</u>		
Zone of injection <u>MORROW</u>			ft. to ft. <u>5254-5666</u>	Perf. or open hole <u>Perf</u>		

Type Mit: Pressure Radioactive Tracer Survey Temperature Survey

F Time: Start 0 Min. 15 Min. 30 Min.

I	E	L	D	D	A	T	A
Pressures:	<u>300</u>	<u>300</u>	<u>300</u>	Set up 1	System Pres. during test	<u>0</u>	
				Set up 2	Annular Pres. during test	<u>300</u>	
				Set up 3	Fluid loss during test	<u>0</u>	bbls.

Tested: Casing or Casing - Tubing Annulus

The bottom of the tested zone is shut in with A PACKER

Test Date 6/4/14 Using RAWHIDE WELL SERVICES Company's Equipment

The operator hereby certifies that the zone between 0 feet and 5100 feet

was the zone tested X Jens Max Signature Title

The results were Satisfactory , Marginal _____, Not Satisfactory _____

State Agent Kenny Sullivan Title Part II Witness: Yes No _____

REMARKS: 5 YEAR RE-TEST

Origin. Conservation Div.; KDHE/T; Dist. Office; Computer Update

JUN 11 2014

GPS entered

6/13/14
SCANNED LITE

COPY

KCC Form U-7 6/84

KCC DODGE CITY

[Handwritten mark]

March 07, 2017

Katherine McClurkan
Merit Energy Company, LLC
13727 Noel Road, Suite 1200
Dallas, TX 75240

Re: Temporary Abandonment
API 15-129-21017-00-02
SERU 24-1
SW/4 Sec.35-32S-40W
Morton County, Kansas

Dear Katherine McClurkan:

"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 03/07/2018.

- * 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 03/07/2018.

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

Very truly yours,

Michael Maier"