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

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

1354514

TEMPORARY ABANDONMENT WELL APPLICATION

Name:Address 1:Address 2:City:Contact Person:Phone: ()Contact Person Email:Field Contact Person:Field Contact Person Phone: (State:	Zip: +		GPS Location	Sec on: Lat:	WGS84	S Line c W Line c (e.gxxx.xxxxx)	of Section					
Address 2: City: Contact Person: Phone: () Contact Person Email: Field Contact Person:	State:	Zip: +		GPS Locatio	on: Lat:	feet from N / feet from E / , Long: WGS84	S Line c W Line c	of Section					
City: Contact Person: Phone:() Contact Person Email: Field Contact Person:	State:	Zip: +		GPS Location	on: Lat:	feet from E / , Long: UWGS84	(e.gxxx.xxxxx)						
Contact Person: Phone:() Contact Person Email: Field Contact Person:				GPS Location	on: Lat:	, Long: WGS84	(e.gxxx.xxxxx)	of Section					
Phone:() Contact Person Email: Field Contact Person:				Datum:	NAD27 🗌 NAD83	WGS84							
Contact Person Email:				County:				GPS Location: Lat:					
Field Contact Person:					County:								
				Lease Name		Well #:							
Field Contact Person Phone: (_)			Well Type: (check one) 🗌 Oil 🗌]Gas 🗌 OG 🗌 WSW 🗌 Ot	her:						
(_ /		Field Contact Person Phone: ()				SWD Permit #: ENHR Permit #:						
					rage Permit #:								
				Spud Date:		Date Shut-In:							
C	onductor	Surface	Pro	oduction	Intermediate	Liner	Tubing	3					
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 o	f cement,	to	(bottom) W /	sacks of cement. Date	:						
Do you have a valid Oil & Gas Lease		_		(100)	(Dottom)								
Depth and Type: Dunk in Hole at	t [Tools in Hole at	Ca	asing Leaks:	Yes No Dept	h of casing leak(s):							
Type Completion: ALT. I ALT. I							Saur (J Cement					
Packer Type:	Size:		Inch	Set at:	Fee	et							
Total Depth:	Plug Bac	k Depth:		Plug Back Metho	od:								
Geological Date:													
Formation Name	Formation	Top Formation Base)		Completion	n Information							
1	At:	to F	Feet Perfo	pration Interval _	to Fe	eet or Open Hole Interval	to	Feet					
2	At:	to F	Feet Perfo	pration Interval -	to Fe	eet or Open Hole Interval	to	Feet					

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: 🗌 Yes 🗌 D	Denied Date:				

Mail to the Appropriate KCC Conservation Office:

Nom Nom <th>KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801</th> <th colspan="2">Phone 620.682.7933</th>	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 - 1500 SW Seventh Steet, Chanute, KS 66720	Phone 620.432.2300	
	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.261.6250	



Phone: 620-432-2300 Fax: 620-432-2309 http://kcc.ks.gov/

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

May 22, 2017

Phil Frick D. E. Exploration, Inc. PO BOX 128 WELLSVILLE, KS 66092-0128

Re: Temporary Abandonment API 15-091-22312-00-01 SCHROEDER I-3 SW/4 Sec.01-15S-21E Johnson County, Kansas

Dear Phil Frick:

"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 05/22/2018.

* 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 05/22/2018.

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

Very truly yours,

Taylor Herman"