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

1363228

## **TEMPORARY ABANDONMENT WELL APPLICATION**

| OPERATOR: License#                 |                   |                    |                   | API No. 15   |               |                          |            |           |        |
|------------------------------------|-------------------|--------------------|-------------------|--|---------------|--------------------------|------------|-----------|--------|
| Name:                              |                   |                    | Spot Description: |  |               |                          |            |           |        |
| Address 1:                         |                   |                    |                   |  | Se            | c Twp                    | S. R       | E         | W      |
| Address 2:                         |                   |                    |                   |  |               | feet from                |            |           |        |
| City:                              | State:            | _ Zip: +           |                   |  |               | feet from                |            | Line of S | ection |
| Contact Person:                    |                   |                    |                   | GPS Location: Lat:, Long:, Long:<br>Datum: NAD27 NAD83 WGS84 |               |                          |            |           |        |
| Phone:()                           |                   |                    |                   |  |               | Elevation:               |            | GL        | КВ     |
| Contact Person Email:              |                   |                    |                   |  |               |                          |            |           |        |
| Field Contact Person:              |                   |                    |                   | Well Type: (cl   | heck one) 🗌 C | Dil 🗌 Gas 🗌 OG 🗌 WSW     | V Other: _ |           |        |
| Field Contact Person Phone         |                   |                    |                   |  |               | ENHR                     |            |           |        |
|                                    |                   |                    |                   |  |               |                          |            |           |        |
|                                    |                   |                    |                   | Spud Date:   |               | Date Shut-In:            |            |           |        |
|                                    | Conductor         | Surface            | Pro               | oduction   | Intermedia    | ite Liner                |            | Tubing    |        |
| Size                               |                   |                    |                   |  |               |                          |            |           |        |
| Setting Depth                      |                   |                    |                   |  |               |                          |            |           |        |
| Amount of Cement                   |                   |                    |                   |  |               |                          |            |           |        |
| Top of Cement                      |                   |                    |                   |  |               |                          |            |           |        |
| Bottom of Cement                   |                   |                    |                   |  |               |                          |            |           |        |
| Casing Fluid Level from Sur        | face              | Hoy                | v Determined?     | ,  |               |                          | Date:      |           |        |
|                                    |                   |                    |                   |  |               |                          |            |           |        |
| Casing Squeeze(s):                 | (bottom)          |                    |                   | (top) (b   | bottom)       |                          |            |           |        |
| Do you have a valid Oil & G        | as Lease? 🗌 Yes [ | No                 |                   |  |               |                          |            |           |        |
| Depth and Type: 🗌 Junk i           | n Hole at         | Tools in Hole at _ | Ca                | ising Leaks:   | Yes No        | Depth of casing leak(s): |            |           |        |
| Type Completion:                   |                   |                    |                   |  |               |                          |            |           |        |
| Packer Type:                       |                   |                    |                   |  |               |                          |            |           |        |
|                                    |                   |                    |                   |  |               |                          |            |           |        |
| Total Depth:                       | Plug Ba           | ack Depth:         |                   | Plug Back Method   | d:            |                          |            |           |        |
|                                    |                   |                    |                   |  |               |                          |            |           |        |
| Geological Date:                   |                   | Top Formation Bas  | e                 |  | Comp          | pletion Information      |            |           |        |
| Geological Date:<br>Formation Name | Formation         |                    |                   |  |               |                          |            |           |        |
| Ū.                                 |                   | to                 | Feet Perfo        | ration Interval  | to            | Feet or Open Hole Int    | erval      | 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 620.682.7933 |
|--|--|--------------------|
|  | 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: 620-682-7933 http://kcc.ks.gov/

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

August 29, 2017

Rexana Prater Prater Oil & Gas Operations, Inc. 10356 BLUESTEM BLVD PRATT, KS 67124-6712

Re: Temporary Abandonment API 15-151-22045-00-00 LATHROP B 1-3 SE/4 Sec.03-27S-12W Pratt County, Kansas

Dear Rexana Prater:

"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 08/29/2018.

\* 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 08/29/2018.

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

Very truly yours,

Michael Maier"