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

1368932

## **TEMPORARY ABANDONMENT WELL APPLICATION**

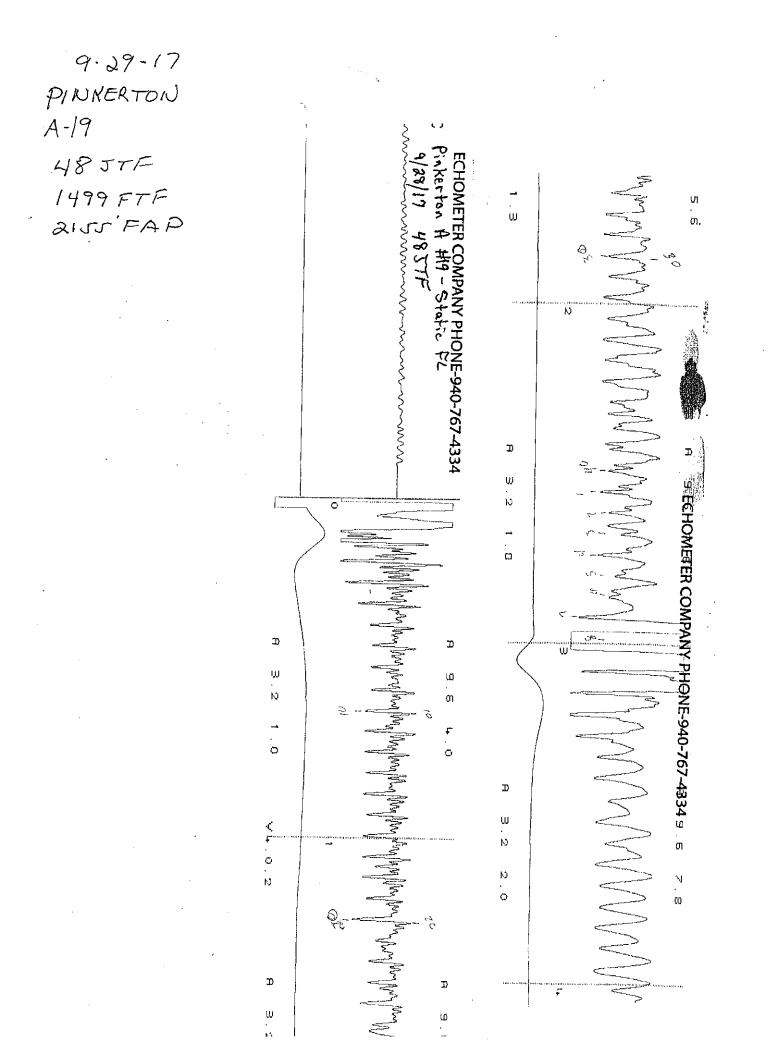
| OPERATOR: License#  |                    |                    |           | API No. 15 Spot Description: |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
|---|--------------------|--------------------|-----------|------------------------------|--------------|------------------------|-----------|---------|------------------|---------------------------|------|--|--|--|-----------------|---------------|-----------|--|--|
|   |                    |                    |           |                              |              |                        |           |         | Sec Twp S. R E W |                           |      |  |  |  |                 |               |           |  |  |
|   |                    |                    |           | Address 2:                   |              |                        |           |         |                  | feet from                 |      |  |  |  |                 |               |           |  |  |
| City:        State:        Zip:          Contact Person:         Phone:(          Contact Person Email: |                    |                    |           |                              |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
|   |                    |                    |           |                              |              |                        |           |         |                  | Field Contact Person:     |      |  |  | Well Type: (check one) Oil Gas OG WSW Other: |                 |               |           |  |  |
|   |                    |                    |           |                              |              |                        |           |         |                  | Field Contact Person Phon | e:() |  |  |  |                 | ENHR F        | Permit #: |  |  |
|   |                    |                    |           |                              |              |                        |           |         |                  |                           | ( )  |  |  |  | orage Permit #: | Date Shut-In: |           |  |  |
|   |                    |                    |           | Spud Date:                   |              | Date Shut-In:          |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
|   | Conductor          | Surface            | Pro       | duction                      | Intermediate | Liner                  |           | Tubing  |                  |                           |      |  |  |  |                 |               |           |  |  |
| Size  |                    |                    |           |                              |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Setting Depth   |                    |                    |           |                              |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Amount of Cement  |                    |                    |           |                              |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Top of Cement   |                    |                    |           |                              |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Bottom of Cement  |                    |                    |           |                              |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Casing Fluid Level from Su  | Irface:            | How De             | termined? |                              |              |                        | _ Date:   |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Casing Squeeze(s):  | b) to w ,          | / sacks of ce      | ement,    | to                           | (bottom) w / | sacks of cemen         | it. Date: |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Do you have a valid Oil & O   | Gas Lease? 🗌 Yes 🗌 | No                 |           |                              |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Depth and Type: Unk   | in Hole at [       | Tools in Hole at   | Cas       | sing Leaks:                  | Yes No Dep   | oth of casing leak(s): |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Type Completion:  |                    |                    |           |                              |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Packer Type:  |                    |                    |           |                              |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Total Depth:  | Plug Ba            | ck Depth:          | F         | Plug Back Method:            |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Geological Date:  |                    |                    |           |                              |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| Formation Name  | Formation          | Top Formation Base |           |                              | Completi     | on Information         |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |
| 1   | At:                | to Feet            | Perfor    | ration Interval.             | to           | Feet or Open Hole Inte | erval     | to Feet |                  |                           |      |  |  |  |                 |               |           |  |  |
| 2   | At:                | to Feet            | Perfo     | ration Interval              | to           | Feet or Open Hole Inte | erval     | toFeet  |                  |                           |      |  |  |  |                 |               |           |  |  |
|   |                    |                    |           |                              |              |                        |           |         |                  |                           |      |  |  |  |                 |               |           |  |  |

## 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                           | enied Date:  |           |               |                |                           |

## Mail to the Appropriate KCC Conservation Office:

| Non-         Non- <th< th=""><th>KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801</th><th>Phone 620.682.7933</th><th>I</th></th<> | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801               | Phone 620.682.7933 | I |
|---|--|--------------------|---|
|   | KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.337.7400 | I |
|   | KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720                            | Phone 620.902.6450 | I |
|   | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                      | Phone 785.261.6250 | I |





Phone: 785-261-6250 Fax: 785-625-0564 http://kcc.ks.gov/

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

October 04, 2017

Nick Ahlerich Murfin Drilling Co., Inc. 250 N WATER STE 300 WICHITA, KS 67202-1216

Re: Temporary Abandonment API 15-147-20547-00-00 PINKERTON A 19 NE/4 Sec.31-05S-20W Phillips County, Kansas

Dear Nick Ahlerich:

"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 10/04/2018.

\* 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 10/04/2018.

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

Very truly yours,

**RICHARD WILLIAMS** "