KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# | | | | API No. 15- | | | | | |
|-----------------------------|------------------------------|-----------------|------------------------|--|----------------|---------------------|-----------------|--------|-----------|
| Name: | | | | Spot Descrip | otion: | | | | |
| Address 1: | | | | Sec Switching Sec S. R E W feet from N / S Line of Section | | | | | |
| | | | | | | | | | |
| Contact Person: | | | | GPS Location: Lat: | | | | | |
| | | | | | | | | | |
| Field Contact Person: | | | | Well Type: (a | check one) 🗌 (| Oil 🗌 Gas 🗌 OG 🛛 | wsw 🗆 c | other: | |
| Field Contact Person Phon | | | | SWD Permit #: ENHR Permit #: | | | | | |
| | .() | | | | | | _ | | |
| | | | | Spud Date:_ | | Date | Shut-In: | | |
| | Conductor | Surface | Pi | oduction | Intermedia | ate | Liner | Tubin | ıg |
| Size | | | | | | | | | |
| Setting Depth | | | | | | | | | |
| Amount of Cement | | | | | | | | | |
| Top of Cement | | | | | | | | | |
| Bottom of Cement | | | | | | | | | |
| Casing Fluid Level from Su | irface. | | How Determined | 2 | | | Dat | ·•· | |
| Casing Squeeze(s): | | | | | | | | | |
| Do you have a valid Oil & O | Gas Lease? Yes | No | | | | | | | |
| Depth and Type: | in Hole at | Tools in Hole a | it C: | asing Leaks | Yes No | Depth of casing lea | ak(s). | | |
| Depth and Type: Unk | | | | | | | | | |
| Type Completion: AL | | | | | | | w / | sack | of cement |
| Packer Type: | Size: _ | | Inch | Set at: | | Feet | | | |
| Total Depth: | Plug B | ack Depth: | | Plug Back Metho | od: | | | | |
| Geological Date: | | | | | | | | | |
| Formation Name | Formation Top Formation Base | | Completion Information | | | | | | |
| | â : | to | Feet Perf | oration Interval | to | Feet or Open | Hole Interval _ | to | Feet |
| 1 | At: | | | | | | | | |

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 🗌 De | nied Date: | | | | |

Mail to the Appropriate KCC Conservation Office:

| $\begin{array}{ c c c c c c c c c c c c c c c c c c c$ | 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 |

STATE OF KANSAS

Corporation Commission Conservation Division District No. 1 210 E. Frontview, Suite A Dodge City, KS 67801



PHONE: 620-682-7933 http://kcc.ks.gov/

GOVERNOR JEFF COLYER, M.D. Shari Feist Albrecht, Chair | Jay Scott Emler, Commissioner | Dwight D. Keen, Commissioner

August 07, 2018

Emily Hundley-Goff Cholla Production, LLC 10390 BRADFORD RD. SUITE 201 LITTLETON, CO 80127

Re: Temporary Abandonment API 15-171-20742-00-01 BONTRAGER 29-1 OWWO NE/4 Sec.29-19S-33W Scott County, Kansas

Dear Emily Hundley-Goff:

"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 08/07/2019.

* 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 08/07/2019.

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

Very truly yours,

Michael Maier"