



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 620.682.7933
	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

CASING MECHANICAL INTEGRITY TEST

DOCKET # 0-20175.0

Disposal Enhanced Recovery:

NW-SE-NE-NE, Sec 5, T 33 S, R 19

Repressuring
Flood
Tertiary

41635 (41631) Feet from South Section Line
648 (1642) Feet from East Section Line

Date injection started June 1981
API #15 - 033 - 20356-00-01

Lease Jellison Well # 2-5
County Comanche

Operator: SandRidge E+P, L.L.C.
Name &
Address 123 Robert S. Kerr Ave.

Operator License # 34192
Contact Person Ryan Webb

Oklahoma City, OK 73102-6406

Phone 405-541-0322

Max. Auth. Injection Press. (0) 1000 psi; Max. Inj. Rate (0) 450 bbl/d;
If Dual Completion - Injection above production _____ Injection below production _____

	Conductor	Surface	Production	Liner		Tubing
Size		<u>8 5/8"</u>	<u>4 1/2"</u>		Size	<u>2 3/8"</u>
Set at		<u>1041'</u>	<u>4524'</u>		Set at	<u>4331'</u>
Cement Top		<u>0</u>	<u>2800'</u>		Type	<u>Anuloc</u>
" Bottom		<u>1041'</u>	<u>4524'</u>			

DV/Perf. _____ TD (and plug back) 5327 (4461) ft. depth
Packer type Baker Locset Size 4 1/2" x 2 3/8" Set at 4331'
Zone of injection LKC ft. to ft. 4400-4445 Perf. or open hole pack

Type Mit: Pressure Radioactive Tracer Survey Temperature Survey

10:55 330#
F Time: Start 10 Min. 20 Min. 30 Min.
I
E Pressures: 330# 330# 330# Set up 1 System Pres. during test 0
L Set up 2 Annular Pres. during test 330#
D Set up 3 Fluid loss during test 0 bbls.
D
A Tested: Casing or Casing - Tubing Annulus

The bottom of the tested zone is shut in with a packer

Test Date 9/25/17 Using Brian's Hot Oil Service Company's Equipment

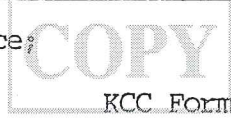
The operator hereby certifies that the zone between 0 feet and 4331 feet

was the zone tested Ryan Webb Signature Title

The results were Satisfactory , Marginal , Not Satisfactory
State Agent Eric MacLaren Title ECRS Witness: Yes No
REMARKS: TAD well (CP-11 was expired) (9-12-17), 5 year retest

Origin. Conservation Div.; KDHE/T; Dist. Office;
 Computer Update GPS/37.20549°N, -99.40226°W KCC Form U-7 6/84

9/29/17
JA
SCANNED



October 03, 2017

Laci Bevans
SandRidge Exploration and Production LLC
123 ROBERT S. KERR AVE
OKLAHOMA CITY, OK 73102-6406

Re: Temporary Abandonment
API 15-033-20356-00-01
JELLISON 2-5
NE/4 Sec.05-33S-19W
Comanche County, Kansas

Dear Laci Bevans:

"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 10/03/2018.

- * 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 10/03/2018.

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

Very truly yours,

Michael Maier"