1372294

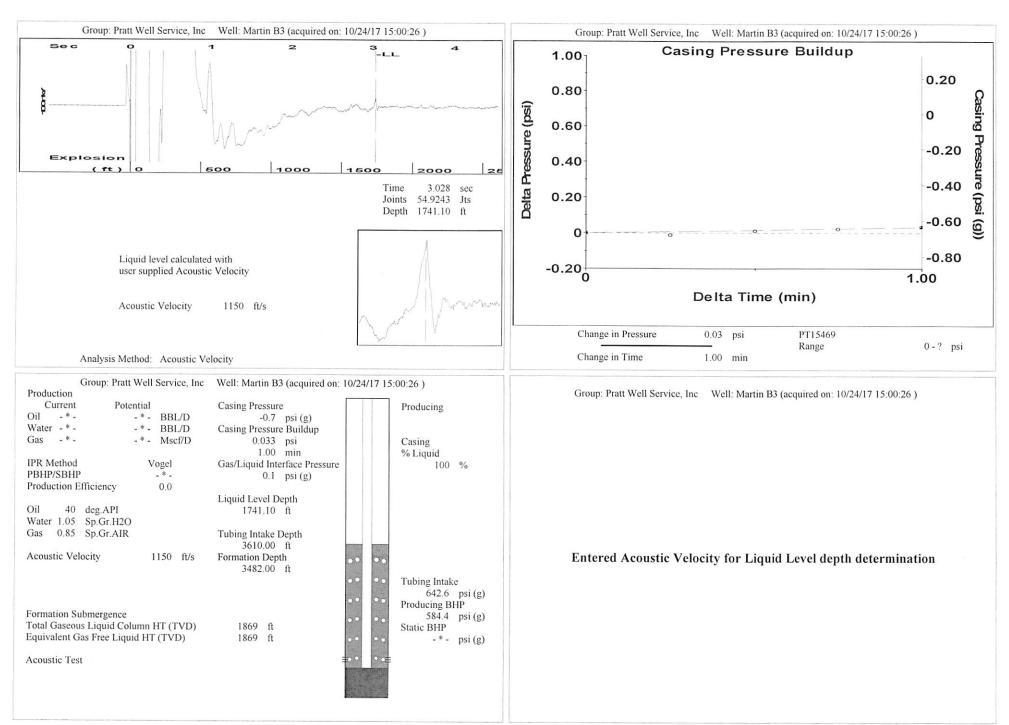
Form CP-111 July 2017 Form must be Typed Form must be signed

TEMPORARY ABANDONMENT WELL APPLICATION

Form must be signed All blanks must be complete

OPERATOR: License# _____ API No. 15-Spot Description: ___ _ - ___ - ___ Sec. ____ Twp. ____ S. R. ___ 🗌 E 🦳 W Address 1: _____ feet from N / S Line of Section Address 2: ______ feet from E / W Line of Section ______ State: _____ Zip: _____ + __ _ _ _ _ _____ , Long: _____ (e.g. xx.xxxxx) Datum: NAD27 NAD83 WGS84 Phone:(_____) __ _____ Elevation:____ ____ GL KB County: Contact Person Email: _____ __ Well #: __ Lease Name: ___ Well Type: (check one) Oil Gas OG WSW Other: Field Contact Person: ____ Field Contact Person Phone: (_____) ____ Gas Storage Permit #:____ Spud Date: ___ ___ Date Shut-In: __ Tubing Conductor Surface Production Intermediate Liner Size Setting Depth Amount of Cement Top of Cement **Bottom of Cement** Casing Fluid Level from Surface:____ ___ How Determined? ____ Casing Squeeze(s): _____ to ____ w / ____ sacks of cement, ____ to ____ w / ____ sacks of cement. Date: ___ Do you have a valid Oil & Gas Lease? Yes No Depth and Type: Usual Junk in Hole at _____ Tools in Hole at ____ Casing Leaks: Yes No Depth of casing leak(s): _____ Type Completion: ALT. I Depth of: DV Tool: _____w / ____ sacks of cement Port Collar: ____w / ____ sack of cement __ Size: ___ __ Inch Set at: ___ Packer Type: ___ Total Depth: ___ ___ Plug Back Method: ___ __ Plug Back Depth: ___ Geological Date: **Formation Name** Formation Top Formation Base Completion Information ___ At: _____ to _____ Feet Perforation Interval ____ ____to_____ Feet or Open Hole Interval _____ to _____ Feet _____ At: _____ to ____ Feet Perforation Interval _____ to ____ Feet or Open Hole Interval ____ HINDER DENALTY OF RED HIDV I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE REST OF MY KNOW! EDGE Submitted Electronically Do NOT Write in This Date Tested: Results: Date Plugged: Date Repaired: Date Put Back in Service: Space - KCC USE ONLY Review Completed by: ___ Comments: TA Approved: Yes 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



Conservation Division District Office No. 4 2301 E. 13th Street Hays, KS 67601-2651



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

Sam Brownback, Governor

Pat Apple, Chairman Shari Feist Albrecht, Commissioner Jay Scott Emler, Commissioner

November 06, 2017

Kenneth C Gates Pratt Well Service, Inc. PO BOX 847 PRATT, KS 67124-0847

Re: Temporary Abandonment API 15-051-02353-00-00 MARTIN 3 SW/4 Sec.19-11S-20W Ellis County, Kansas

Dear Kenneth C Gates:

"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 11/06/2018.

- * 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 11/06/2018.

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

Very truly yours,

RICHARD WILLIAMS "