

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

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

<b>Do NOT Write in This Space - KCC USE ONLY</b>	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# D-27,087

Disposal Well  Enhanced Recovery:  
Repressuring   
Flood   
Tertiary

*OWDP*

HENESESE, Sec 13, T 31, S,R 15 E/W  
61PS 1259 1220 Feet from South Section Line  
DAS 113 100 Feet from East Section Line  
Lease Leewright Well # 3 SWD  
County MG

Date injection started \_\_\_\_\_  
API #15- 125-29,871-00-00

Operator: Dart Cherokee Basin Opr. Co.  
Name & Address P.O. Box 177  
Mason, MI 48854-0177

Operator License# 33074  
Contact Person Beth Oswald  
Phone 517-244-8716

Max. Auth. Injection Press \_\_\_\_\_ Psi; Max Inj. Rate \_\_\_\_\_ bbl/d;  
If Dual Completion - Injection above production \_\_\_\_\_ Injection below production \_\_\_\_\_  
Conductor Surface Production Liner Tubing  
Size \_\_\_\_\_ 7" \_\_\_\_\_ 4 1/2" \_\_\_\_\_ Size 2 3/8"  
Set at \_\_\_\_\_ 20' \_\_\_\_\_ 1354' \_\_\_\_\_ Set at 1200'  
Cement Top \_\_\_\_\_ 0' \_\_\_\_\_ 0' \_\_\_\_\_ Type 54E  
" Bottom \_\_\_\_\_ 20' \_\_\_\_\_ 1354' \_\_\_\_\_  
DV/Perf. \_\_\_\_\_ TD (and plug back) \_\_\_\_\_ ft. depth  
Packer type J Packer Size 4 1/2 x 2 3/8 Set at 1200'  
Zone of injection 1245' ft. to ft. 1280' Perf. or open hole parts

Type MIT: Pressure:  Radioactive Tracer Survey:  Temperature Survey:

F Time: Start 10 Min 20 Min 30 Min

I Pressures: 325 325 325 Set up 1 System Pres. during test \_\_\_\_\_

L \_\_\_\_\_ Set up 2 Annular Pres. during test \_\_\_\_\_

D \_\_\_\_\_ Set up 3 Fluid loss during test \_\_\_\_\_ bbls.

A Tested: Casing  or Casing - Tubing Annulus

The bottom of the tested zone in shut in with A PACKER

Test Date 6-25-14 Using Co. Tools Company's Equipment

The operator hereby certifies that the zone between 1200' feet and 0 feet

was the zone tested [Signature] Production Foreman  
Signature Title

The results were Satisfactory  Marginal \_\_\_\_\_ Not Satisfactory \_\_\_\_\_

State Agent: [Signature] Title: PERT Witness: YES  NO \_\_\_\_\_

REMARKS: Tubing & Packer Test (Backside fill of fluid)

Origin. Conservation Div.:  KDHE/T: MF  Dist. Office JUL 08 2014  
 Computer Update Is there Chemical Sealant or a Mechanical Casing patch in the annular space? (Y/N)

GPS Lat 37.34495385 GPS Long -95.71130108

(If YES please describe in REMARKS)  
KCC Form U-7

SCANNED  
JUL 14 2014

January 23, 2018

Tom Kaetzer  
RedBud Oil & Gas Operating, LLC  
16000 STUEBNER AIRLINE RD SUITE 320  
SPRING, TX 77379

Re: Temporary Abandonment  
API 15-125-29871-00-00  
LEEWRIGHT 3  
SE/4 Sec.13-31S-15E  
Montgomery County, Kansas

Dear Tom Kaetzer:

"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 01/23/2019.

- \* 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 01/23/2019.

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

Very truly yours,

Duane Sims"