

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: _____
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: _____

Table with 7 columns: Conductor, Surface, Production, Intermediate, Liner, Tubing. Rows include 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: _____
Do you have a valid Oil & Gas Lease? Yes No
Depth and Type: Junk in Hole at _____ (depth) Tools in Hole at _____ (depth) Casing Leaks: Yes No Depth of casing leak(s): _____
Type Completion: ALT. I ALT. II Depth of: DV Tool: _____ w / _____ sacks of cement Port Collar: _____ w / _____ sack of cement
Packer Type: _____ Size: _____ Inch Set at: _____ Feet
Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Date:

Table with 4 columns: Formation Name, Formation Top, Formation Base, Completion Information. Rows 1 and 2.

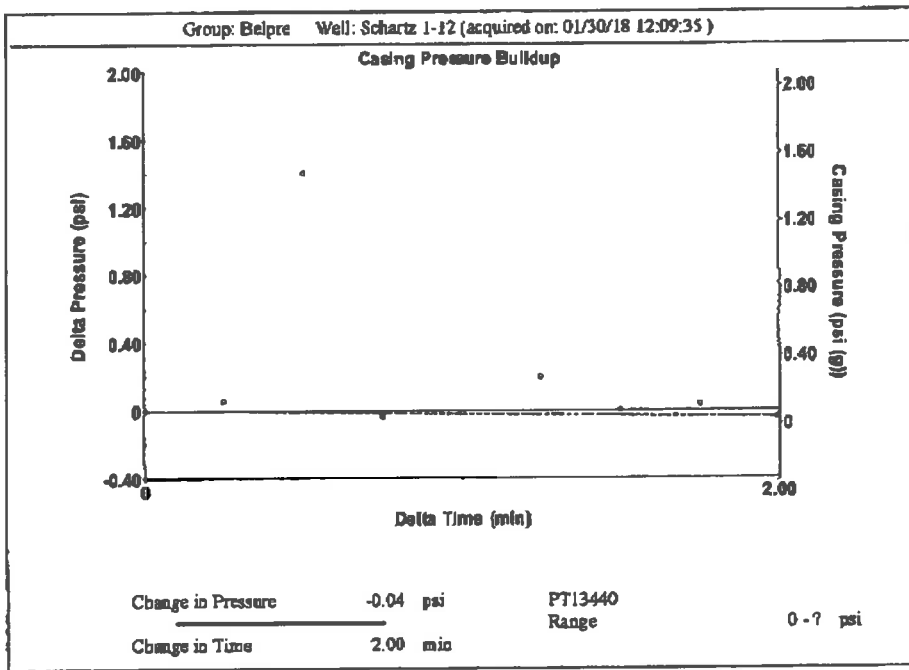
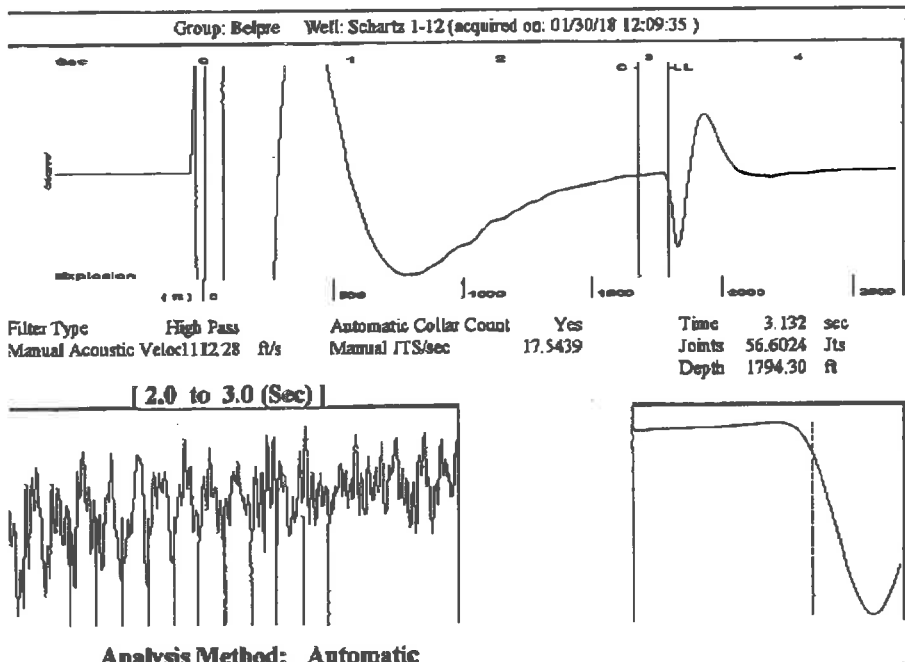
UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

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: Yes Denied Date: _____

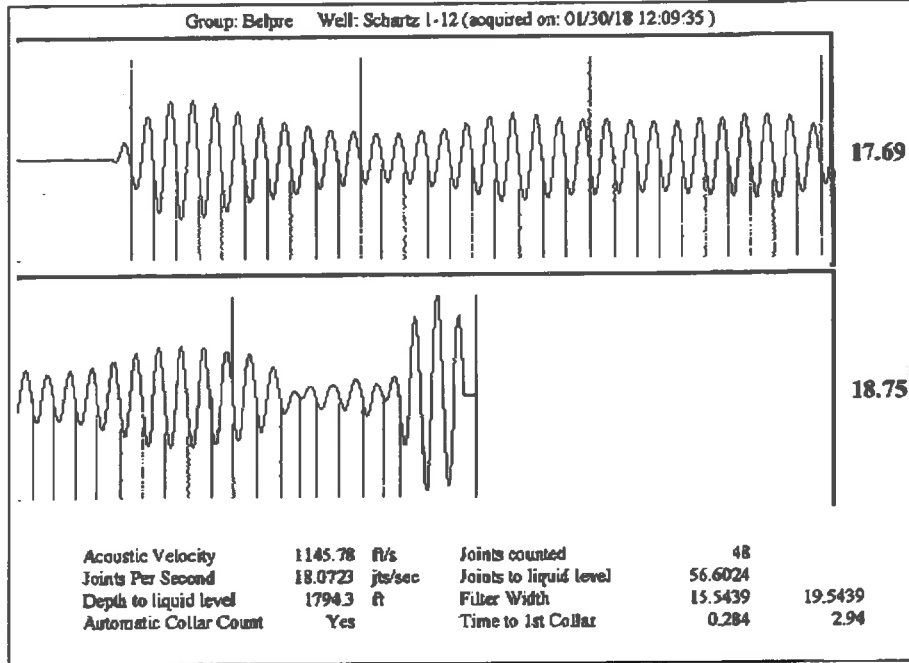
Mail to the Appropriate KCC Conservation Office:

Table with 2 columns: Office Address, Phone. Rows for KCC District Office #1, #2, #3, #4.



Group: Belpre Well: Schartz 1-12 (acquired on: 01/30/18 12:09:35)

Production		Casing Pressure	0.1 psi (g)	Producing
Current	Potential	Casing Pressure Buildup	-0.040 psi	Annular Gas Flow
Oil - . -	- . - BBL/D	Gas/Liquid Interface Pressure	2.00 min	0 Mscf/D
Water - . -	- . - BBL/D	Liquid Level Depth	1794.30 ft	% Liquid
Gas - . -	- . - Mscf/D	Pump Intake Depth	4275.00 ft	100 %
IPR Method	Vogel	Formation Depth	4272.00 ft	
PBHP/SBHP	- . -			
Production Efficiency	0.0			
Oil 40 deg.API				
Water 1.05 Sp.Gr.H2O				
Gas 0.83 Sp.Gr.AIR				
Acoustic Velocity	1145.78 ft/s			
Formation Submergence				
Total Gaseous Liquid Column HT (TVD)	2481 ft			
Equivalent Gas Free Liquid HT (TVD)	2481 ft			
Acoustic Test				
		Pump Intake	823.7 psi (g)	
		Producing BHP	822.7 psi (g)	
		Static BHP	- . - psi (g)	



February 06, 2018

Loveness Mpanje
F. G. Holl Company L.L.C.
9431 E CENTRAL STE 100
WICHITA, KS 67206-2563

Re: Temporary Abandonment
API 15-047-20522-00-00
SCHARTZ 1-12
SW/4 Sec.12-24S-17W
Edwards County, Kansas

Dear Loveness Mpanje:

"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 02/06/2019.

- * 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 02/06/2019.

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

Very truly yours,

Michael Maier"