Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

Form must be Typed Form must be signed

TEMPORARY ABANDON

OPERATOR: License#	State:	_ Zip:	+	Spot Description GPS Loca Datum: County: Lease Nar Well Type: SWD F Gas St	ription: Ser tion: Lat:(e.] NAD27 NAI ne:(check one) Cermit #: orage Permit #:	g. xx.xxxxx) D83	on: Well #: OG	S Line of W Line of (e.gxxx.xxxxx)	E W f Section f Section						
Address 2:	State:	_ Zip:	+	GPS Loca Datum: County: Lease Nar Well Type: SWD F	tion: Lat:(e. NAD27 NAI ne:(check one) Cermit #: orage Permit #:	7. xx.xxxx) D83	feet from N / / feet from E / , Long: GS84 on: Well #: OG WSW Ot ENHR Permit #	S Line of W Line of (e.gxxx.xxxxx) GL her:	f Section f Section						
City:	State:	_ Zip:	+	GPS Loca Datum: County: Lease Nar Well Type: SWD F	tion: Lat:(e.] NAD27 NAI ne:(check one) Cermit #: orage Permit #:	g. xx.xxxxx) D83	feet from E /, Long: GS84 on: Well #: OG WSW Ot ENHR Permit #	(e.gxxx.xxxxx) GL her:	f Section						
City: Contact Person: Phone:() Contact Person Email: Field Contact Person Phone:(Field Contact Person Phone: (Size	State:)	Zip:	+	GPS Loca Datum: County: Lease Nar Well Type: SWD F	tion: Lat:(e., Parallel (e., Parallel	7. XX.XXXXX) D83	, Long: GS84 on: Well #: OG	(e.gxxx.xxxxx)							
Contact Person: Phone:() Contact Person Email: Field Contact Person: Field Contact Person Phone:(Size Setting Depth Amount of Cement Top of Cement Bottom of Cement Casing Fluid Level from Surface))			Datum: County: Lease Nar Well Type: SWD F	ne: NAI (check one) Cermit #: orage Permit #:	D83	GS84 on: Well #:OG	GL							
Phone:()))			County:	ne: C (check one)	Elevati	on: Well #: OG	 her:							
Contact Person Email: Field Contact Person: Field Contact Person Phone: ()			Lease Nar Well Type: SWD F	ne:C (check one) C Permit #: orage Permit #: _	il	Well #: OG	 her:							
Field Contact Person: Field Contact Person Phone: (_ Size Setting Depth Amount of Cement Top of Cement Bottom of Cement Casing Fluid Level from Surface))			Well Type:	Permit #: orage Permit #: _		_ ENHR Permit #								
Size Setting Depth Amount of Cement Top of Cement Bottom of Cement Casing Fluid Level from Surface))			SWD F	Permit #: orage Permit #: _		_ ENHR Permit #		Well Type: (check one)						
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Casing Fluid Level from Surface															
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Casing Squeeze(s):															
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Do you have a valid Oil & Gas L	_ease?	No													
Depth and Type:	lole at	Tools in Hol	le at	Casing Leaks:	Yes No I	Depth of ca	sing leak(s):								
Type Completion: ALT. I							(depth)	Sack u	i cemen						
Packer Type:	Size: _			Inch Set at:		_ Feet									
Total Depth:	Plug Ba	ack Depth:		Plug Back Met	hod:		-								
Geological Date:															
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Formation Name		Top Formation		Denferentiere leterenel	·			4-							
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Submitted E

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 D	enied Date:				

Mail to the Appropriate KCC Conservation Office:



STATE OF KANSAS

Corporation Commission Conservation Division District Office No. 3 137 E. 21st Street Chanute, KS 66720



PHONE: 620-902-6450 http://kcc.ks.gov/

$Governor\ Jeff\ Colyer,\ M.D.$ Shari Feist Albrecht, Chair | Jay Scott Emler, Commissioner | Pat Apple, Commissioner

April 09, 2018

Joe Beeman Beeman, Joseph V. 303 E. GREENWOOD PO BOX 129 HAMILTON, KS 66853

Re: Temporary Abandonment API 15-073-21693-00-00 SCHLOTTERBECK 2 NW/4 Sec.10-24S-12E Greenwood County, Kansas

Dear Joe Beeman:

- "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 04/09/2019.
- * 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 04/09/2019.

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

Very truly yours,

Mike Heffern"