

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.

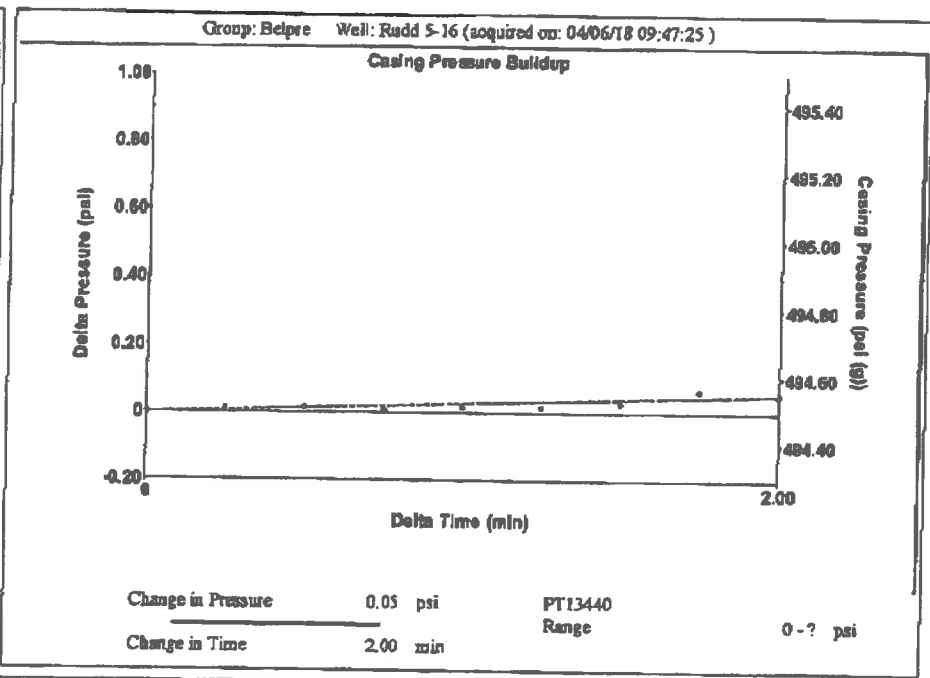
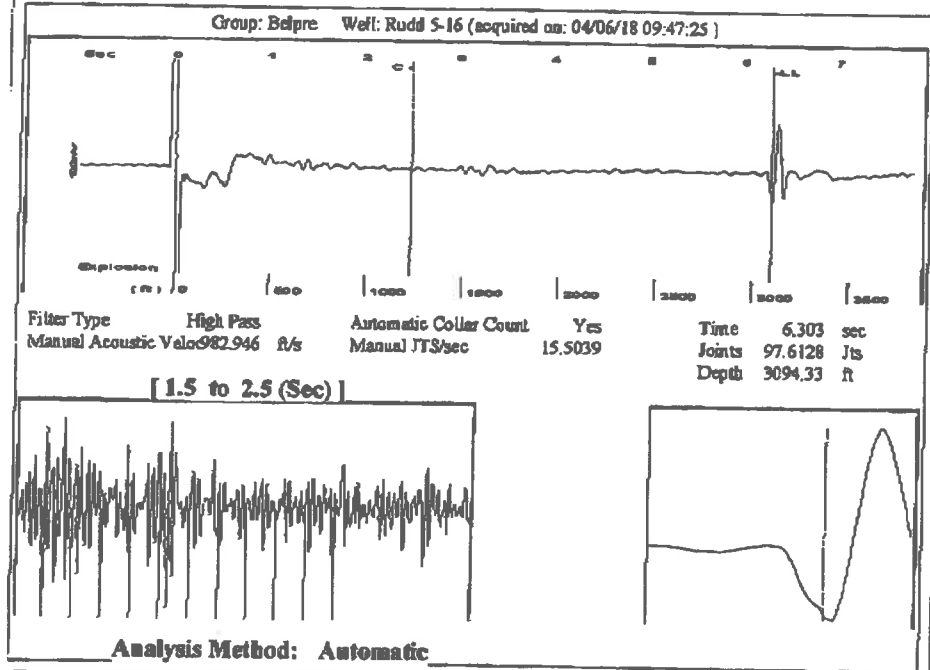
UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

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: _____

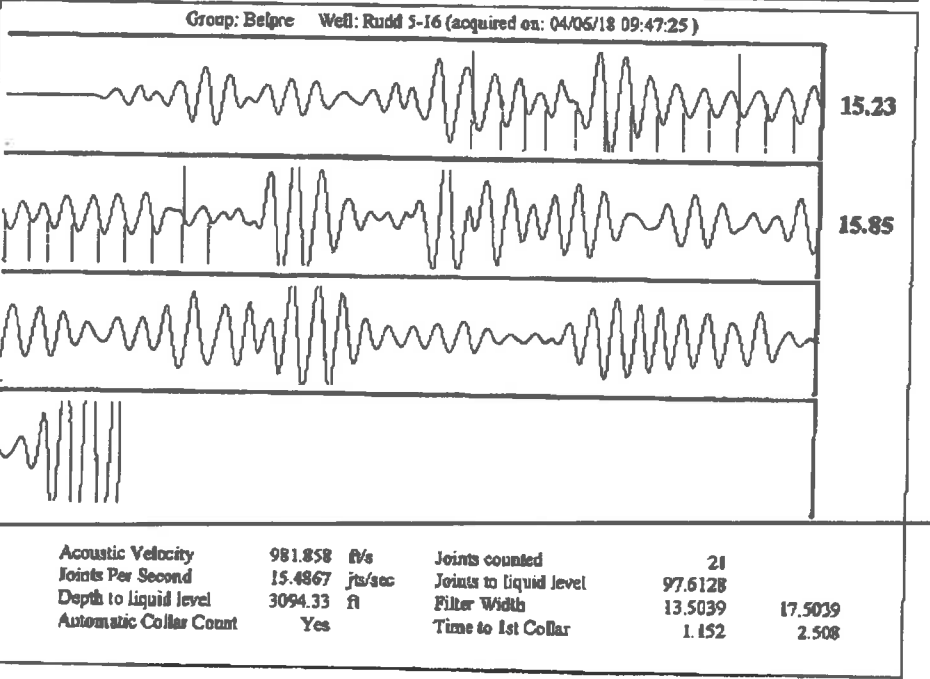
Mail to the Appropriate KCC Conservation Office:

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



Group: Belpre Well: Rudd S-16 (acquired on: 04/06/18 09:47:25)

Production	Potential	Casing Pressure	Producing
Current	-*- BBL/D	494.5 psi (g)	
Oil -*-	-*- BBL/D	Casing Pressure Buildup	Annular
Water -*-	-*- Mscf/D	0.054 psi	Gas Flow
Gas -*-		2.00 min	% Liquid
		Gas/Liquid Interface Pressure	98 %
		554.5 psi (g)	
IPR Method Vogel		Liquid Level Depth	
PBHP/SBHP -*-		3094.33 ft	
Production Efficiency 0.0		Pump Intake Depth	
		4286.00 ft	
Oil 40 deg.API		Formation Depth	
Water 1.05 Sp.Gr.H2O		4292.00 ft	
Gas 0.90 Sp.Gr.AIR			
Acoustic Velocity 981.858 ft/s			
Formation Submergence			
Total Gaseous Liquid Column HT (TVD)	1192 ft		
Equivalent Gas Free Liquid HT (TVD)	1167 ft		
Acoustic Test			



STATE OF KANSAS

CORPORATION COMMISSION
CONSERVATION DIVISION
DISTRICT No. 1
210 E. FRONTVIEW, SUITE A
DODGE CITY, KS 67801



PHONE: 620-682-7933
<http://kcc.ks.gov/>

GOVERNOR JEFF COLYER, M.D.

SHARI FEIST ALBRECHT, CHAIR | JAY SCOTT EMLER, COMMISSIONER | DWIGHT D. KEEN, COMMISSIONER

April 10, 2018

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

Re: Temporary Abandonment
API 15-047-20875-00-00
RUDD 5-16
SE/4 Sec.16-24S-16W
Edwards County, Kansas

Dear Margery L. Nagel:

"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 04/10/2019.

- * 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 04/10/2019.

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

Very truly yours,

Michael Maier"