#### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

# TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#                 |                              |              |           |        | API No. 15                   |                |             |                      |        |           |
|------------------------------------|------------------------------|--------------|-----------|--------|------------------------------|----------------|-------------|----------------------|--------|-----------|
|                                    |                              |              |           |        |                              |                |             |                      |        |           |
| Address 1:                         |                              |              |           |        |                              | S              | ec          | _ Twp S. R           |        | E 🗌 W     |
| Address 2:                         |                              |              |           |        |                              |                |             | feet from N /        | =      |           |
| City:   Zip:  +    Contact Person: |                              |              |           |        |                              |                |             |                      |        |           |
|                                    |                              |              |           |        |                              |                |             |                      |        |           |
| Contact Person Email:              |                              |              |           |        | -                            |                |             | Well #:              |        |           |
| Field Contact Person:              |                              |              |           |        | Well Type: (                 | check one) 🗌   | Oil Gas     |                      | ner:   |           |
| Field Contact Person Phon          |                              |              |           |        | SWD Permit #: ENHR Permit #: |                |             |                      |        |           |
|                                    |                              |              |           |        |                              | rage Permit #: |             |                      |        |           |
|                                    |                              |              |           |        | Spud Date:                   |                |             | _ Date Shut-In:      |        |           |
|                                    | Conductor                    | Surfa        | ice       | Proc   | duction                      | Intermedi      | iate        | Liner                | Tubing | j j       |
| Size                               |                              |              |           |        |                              |                |             |                      |        |           |
| Setting Depth                      |                              |              |           |        |                              |                |             |                      |        |           |
| Amount of Cement                   |                              |              |           |        |                              |                |             |                      |        |           |
| Top of Cement                      |                              |              |           |        |                              |                |             |                      |        |           |
| Bottom of Cement                   |                              |              |           |        |                              |                |             |                      |        |           |
| Casing Fluid Level from Su         | rface:                       |              | How Deter | mined? |                              |                |             | Date                 |        |           |
| Casing Squeeze(s):                 | to w                         |              |           |        |                              |                |             |                      |        |           |
| Do you have a valid Oil & G        |                              |              |           |        |                              |                |             |                      |        |           |
| Depth and Type: Dunk               | in Hole at                   | Tools in Ho  | le at     | _ Cas  | ing Leaks:                   | Yes No         | Depth of ca | asing leak(s):       |        |           |
| Type Completion:                   | T.I ALT.II Depth             | n of: DV Too | l:        | w/     | sacks                        | of cement      | Port Collar | :                    | sack c | of cement |
| Packer Type:                       |                              |              | ,         |        |                              |                |             | (30,237)             |        |           |
| Total Depth:                       | Plug Back Depth:             |              |           | P      | _ Plug Back Method:          |                |             |                      |        |           |
| Geological Date:                   |                              |              |           |        |                              |                |             |                      |        |           |
| Formation Name                     | Formation Top Formation Base |              |           |        | Completion Information       |                |             |                      |        |           |
| 1                                  | At:                          | to           | Feet      | Perfor | ation Interval _             | to             | Feet or     | Open Hole Interval   | to     | Feet      |
| 2                                  | At:                          | to           | Feet      | Perfor | ation Interval -             | to             | Feet or     | o Open Hole Interval | to     | Feet      |
|                                    |                              |              |           |        |                              |                |             |                      |        |           |

### Submitted Electronically

| Do NOT Write in This<br>Space - KCC USE ONLY | Date Tested: | Results:  | Date Plugged: | Date Repaired: | Date Put Back in Service: |
|--|--------------|-----------|---------------|----------------|---------------------------|
| Review Completed by:                         |              | Comments: |               |                |                           |
| TA Approved: 🗌 Yes 🗌 De                      | enied Date:  |           |               |                |                           |

#### Mail to the Appropriate KCC Conservation Office:

| There have been and the and and there have been been been | 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 |

## 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 17, 2018

Danyelle Barksdale Keith F. Walker Oil & Gas Co., LLC 2482 Washington Drive, Ste. 110 NORMAN, OK 73069

Re: Temporary Abandonment API 15-119-21213-00-00 POSSUM 9 1 NE/4 Sec.09-32S-27W Meade County, Kansas

Dear Danyelle Barksdale:

"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 04/17/2019.

\* 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 04/17/2019.

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

Very truly yours,

Michael Maier"