KOLAR Document ID: 1408183

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CP-111
July 2017
Form must be Typed
Form must be signed
All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# 34998
Name: Ace Energy LLC
Address 1: 11704 ABERDEEN RD
Address 2:
City: LEAWOOD State: KS Zip: 66211 + ____
Contact Person: Jonathan Freiden
Phone: (773) 209-8602
Contact Person Email: Jfreiden@me.com
Field Contact Person:
Field Contact Person Phone: (____)

API No. 15- 15-001-02072-00-00
Spot Description:
__ - SW SE NW Sec. 18 Twp. 26 S. R. 21 ☑ E ☐ W
2886 feet from ☐ N / ☑ S Line of Section
3266 feet from ☑ E / ☐ W Line of Section
GPS Location: Lat: ____ (e.g. xx.xxxxx) , Long: ____ (e.g. -xxx.xxxxx)
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Allen Elevation: ____ ☐ GL ☐ KB
Lease Name: D R NELSON Well #: J 12
Well Type: *(check one)* ☑ Oil ☐ Gas ☐ OG ☐ WSW ☐ Other: ____
☐ SWD Permit #: ____ ☐ ENHR Permit #: ____
☐ Gas Storage Permit #: ____
Spud Date: 3/10/1983 Date Shut-In: 02/12/2014

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	n/a	4.50	2	n/a	n/a	n/a
Setting Depth		20	740			
Amount of Cement		0	0			
Top of Cement		0	0			
Bottom of Cement		20	740			

Casing Fluid Level from Surface: 720 How Determined? Visual Date: 3/10/2018
Casing Squeeze(s): ____ (top) to ____ (bottom) w / ____ sacks of cement, ____ (top) to ____ (bottom) 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: ____ (depth) w / ____ sacks of cement ☐ Port Collar: ____ (depth) w / ____ sack of cement
Packer Type: ____ Size: ____ Inch Set at: ____ Feet
Total Depth: 750 Plug Back Depth: ____ Plug Back Method: ____

Geological Date:

Formation Name	Formation Top	Formation Base	Completion Information
1. ____	At: ____	to ____ Feet	Perforation Interval ____ to ____ Feet or Open Hole Interval 740 to 750 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

***Do NOT Write in This Space* - KCC USE ONLY**

Date Tested:	Results:	Date Plugged:	Date Repaired:	Date Put Back in Service:

Review Completed by: Ryan Duling Comments: ____
TA Approved: ☑ Yes ☐ Denied Date: 07/11/2018

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

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 | DWIGHT D. KEEN, COMMISSIONER

July 11, 2018

Jonathan Freiden
Ace Energy LLC
11704 ABERDEEN RD
LEAWOOD, KS 66211

Re: Temporary Abandonment
API 15-001-02072-00-00
D R NELSON J 12
NW/4 Sec.18-26S-21E
Allen County, Kansas

Dear Jonathan Freiden :

"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 07/11/2019.

* 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 07/11/2019.

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

Very truly yours,

Ryan Duling"