Form CP-111 July 2017 Form must be Typed Form must be signed

## TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

Phone 620.902.6450

Phone 785.261.6250

| ODEDATOR: License#  |                     |   |            | ADI No. 15   |   |                      |                         |  |
|---|---------------------|---|------------|--|---|----------------------|-------------------------|--|
| OPERATOR: License#  |                     |   |            | API No. 15-  Spot Description:   |   |                      |                         |  |
| Address 1:  |                     |   |            |  | •   |                      | R DE W                  |  |
|   |                     |   |            |  |   |                      | I / S Line of Section   |  |
| Address 2:  |                     |   |            | feet from DE / DW Line of Section  |   |                      |                         |  |
| Contact Person:   |                     |   |            | GPS Location: Lat:, Long:  |   |                      |                         |  |
| Phone:( )   |                     |   |            | Datum:         NAD27         NAD83         WGS84           County:               |   |                      |                         |  |
|   |                     |   |            |  | Ele   |                      |                         |  |
|   |                     |   |            |  |   |                      | Other:                  |  |
|   |                     |   |            | SWD Permit #:         ■ ENHR Permit #:           Gas Storage Permit #:         ■ |   |                      |                         |  |
|   |                     |   |            |  |   |                      |                         |  |
|   | Conductor           | Surface   | Pro        | oduction   | Intermediate  | Liner                | Tubing                  |  |
| Size  |                     |   |            |  |   |                      |                         |  |
| Setting Depth   |                     |   |            |  |   |                      |                         |  |
| Amount of Cement  |                     |   |            |  |   |                      |                         |  |
| Top of Cement   |                     |   |            |  |   |                      |                         |  |
| Bottom of Cement  |                     |   |            |  |   |                      |                         |  |
| Casing Fluid Level from Sur   | face:               | How Do  | atermined? | 1  |   | r                    | Oato:                   |  |
| Casing Fluid Level from Surface:       How Determined?       Date:         Casing Squeeze(s):       to to |                     |   |            |  |   |                      |                         |  |
| (top)   | (bottom)            |   |            | (top)  | (bottom)  | danc or comoni. I    |                         |  |
| Do you have a valid Oil & G   | as Lease? Yes       | ] No  |            |  |   |                      |                         |  |
| Depth and Type:   | n Hole at           | Tools in Hole at                                | Ca         | sing Leaks:  | Yes No Depth of                                       | casing leak(s):      |                         |  |
| Type Completion: ALT.   |                     |   |            |  |   |                      |                         |  |
| Packer Type:  |                     |   |            |  |   | , , ,                |                         |  |
| Total Depth:  | Plug Bac            | k Depth:  |            | Plug Back Meth   | od:   |                      |                         |  |
| Geological Date:  |                     |   |            |  |   |                      |                         |  |
| Formation Name  | Formation -         | Ton Formation Base                              |            |  | Completion Ir   | formation            |                         |  |
|   | ·                   |   |            |  | ration Interval to Feet or Open Hole Interval to Feet |                      |                         |  |
| 2   |                     |   |            |  | ration Interval to Feet or Open Hole Interval to Feet |                      |                         |  |
| Σ   | /nt                 | 10 1 66   | 1 6110     | nation interval  | 10  | or open note interve | 101 661                 |  |
| IINDED DENALTY OF DED   | IIIDV I UEDEDV ATTE | PT TUAT TUE INCODM                              | ATION CO   | NTAINED HEE  | EIN ICTUIE AND COD                                    | DECTTO THE DEST      | OE MV KNOW! EDGE        |  |
|   |                     | Submit  | ted Ele    | ctronicall   | V   |                      |                         |  |
|   |                     |   |            |  | ,   |                      |                         |  |
|   |                     |   |            |  |   |                      |                         |  |
| Do NOT Write in This Date Tested: Results:  |                     |   |            |  | Date Plugged:   | Date Repaired: Date  | te Put Back in Service: |  |
| Space - KCC USE ONLY  |                     |   |            |  |   |                      |                         |  |
| Review Completed by:  |                     |   | Comr       | nents:   |   |                      |                         |  |
| TA Approved: Yes  | Denied Date:        |   |            |  |   |                      |                         |  |
|   |                     | Mail to the App                                 | oropriate  | KCC Conserv  | vation Office:  |                      |                         |  |
| Depart State State State State State State State State State  | KCC Distri          | KCC District Office #1 - 210 E. Frontview, Suit |            |  |   | Phone 620.682.7933   |                         |  |
|   | KCC Distri          | KCC District Office #2 - 3450 N. Rock Road,     |            |  | Suite 601, Wichita. KS 67                             | Phone 316.337.7400   |                         |  |

KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720

KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651

## 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 15-001-23888-00-00 D R NELSON K-11 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"