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

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

Phone 316.337.7400

Phone 620.902.6450

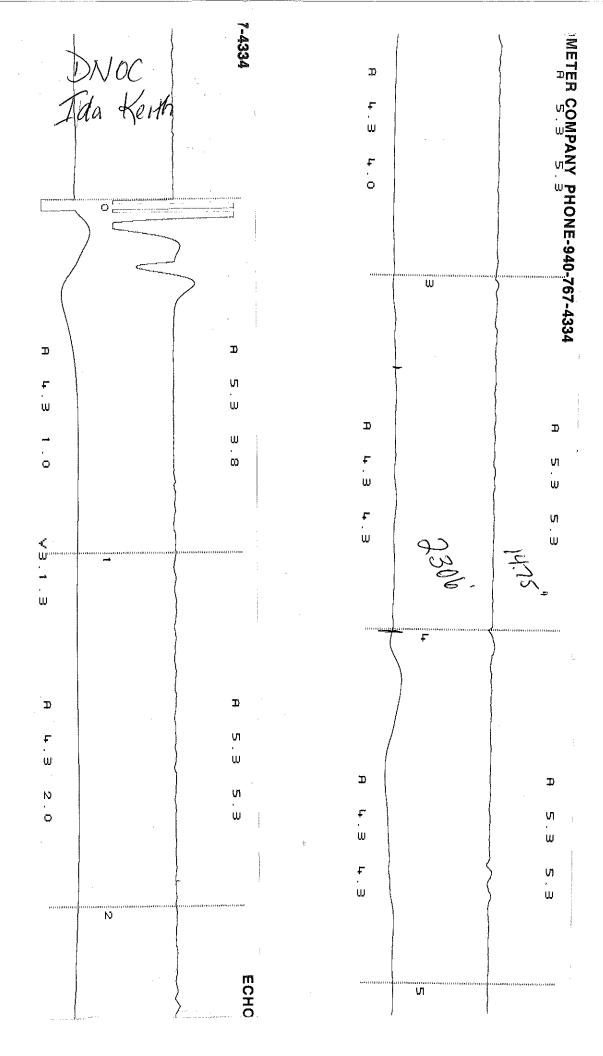
Phone 785.261.6250

| OPERATOR: License# | | | | API No. 15 | | | | | | | | | | | | | | | |
|--|------------------------------|------------------|------------|---|------------------------|-------------------|----------------|----------------|-----------------|--|-----------|---------|----|------------|--------------|------|------------|-------|---|
| OPERATOR: License# | | | | API No. 15- Spot Description: | | | | | | | | | | | | | | | |
| Address 1: | | | | 1 ' | · Sec. | | | | E W | | | | | | | | | | |
| Address 2: | | | | | | | | | | | | | | | | | | | |
| City: State: Zip: + Contact Person: | | | | feet from E / W Line of Section | | | | | | | | | | | | | | | |
| | | | | GPS Location: Lat:, Long:, Long:, Datum: NAD27 NAD83 WGS84 | | | | (e.gxxx.xxxxx) | (e.gxxx.xxxxxx) | | | | | | | | | | |
| | | | | | | | | □GL □KB | | | | | | | | | | | |
| | | | | County: Elevation: GL Lease Name: Well #: | | | | | | | | | | | | | | | |
| | | | | Well Type: (check one) Oil Gas OG WSW Other: SWD Permit #: ENHR Permit #: Gas Storage Permit #: | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | Spud Date: | | Date | ∍ Shut-In: | | |
| | | | | | | | | | | | Conductor | Surface | Pr | oduction | Intermediate | e | Liner | Tubin | g |
| Size | | | | | | | | | | | | | | | | | | | |
| Setting Depth | | | | | | | | | | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | | | | | | | | | | |
| Top of Cement | | | | | | | | | | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | | | | | | | | | | |
| Casing Fluid Level from Surfa | ace. | How Do | etermined' | > | | | 1 | Date: | | | | | | | | | | | |
| Casing Squeeze(s):(top) Do you have a valid Oil & Gas | s Lease? Yes | No | | | | | | | | | | | | | | | | | |
| Depth and Type: | Hole at | Tools in Hole at | Ca | asing Leaks: | Yes No D | epth of casing le | eak(s): | | | | | | | | | | | | |
| Type Completion: ALT. I | | | | | | | | | of cement | | | | | | | | | | |
| Packer Type: Size: Inch | | | | | | | | | | | | | | | | | | | |
| al Depth: Plug Back Depth: I | | | | | | | | | | | | | | | | | | | |
| Geological Date: | | | | | | | | | | | | | | | | | | | |
| Formation Name | Formation Top Formation Base | | | | Completion Information | | | | | | | | | | | | | | |
| 1 | At: | to Fee | t Perfo | oration Interval | to | _ Feet or Oper | n Hole Interva | al to | Feet | | | | | | | | | | |
| 2 | At: | to Fee | t Perfo | oration Interval | to | Feet or Oper | 1 Hole Interva | al to | Feet | | | | | | | | | | |
| INDED DENALTY OF BED I | IIDV I UEDEDV ATTEC | TTUATTUE INCODM | ATION CO | NITAINED LEE | EIN IS TOLIE ANI | COBBECTTO | TUE DEST | OE MV IZNOMI | EDCE | | | | | | | | | | |
| | | Submit | ted Ele | ectronicall | у | | | | | | | | | | | | | | |
| Do NOT Write in This Date Tested: Results: Space - KCC USE ONLY | | | | Date Plugged: Date Repaired: Date Put Back in Service: | | | | | | | | | | | | | | | |
| Review Completed by: | | | Comi | ments: | | | | | | | | | | | | | | | |
| TA Approved: Yes | Denied Date: _ | | | | | | | | | | | | | | | | | | |
| | | Mail to the Ap | propriate | KCC Conser | vation Office: | | | | | | | | | | | | | | |
| KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 | | | | | | | | Phone 620.68 | 32.7933 | | | | | | | | | | |

KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226

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. 4 2301 E. 13th Street Hays, KS 67601-2651



Phone: 785-261-6250 Fax: 785-625-0564 http://kee.ks.gov/

GOVERNOR JEFF COLYER, M.D.

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

June 06, 2018

Ron Nelson Downing-Nelson Oil Co Inc PO BOX 1019 HAYS, KS 67601

Re: Temporary Abandonment API 15-065-01606-00-00 KEITH 1 NE/4 Sec.09-09S-24W Graham County, Kansas

Dear Ron Nelson:

- "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 06/06/2019.
- * 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 06/06/2019.

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

Very truly yours,

RICHARD WILLIAMS"