KOLAR Document ID: 1415787

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

| OPERATOR: License#                                      |                                       |   |                | API No. 15-                            |   |                         |                       |  |
|---|---------------------------------------|---|----------------|--|---|-------------------------|-----------------------|--|
| Name:   |                                       |   |                | Spot Descr                             | Spot Description:   |                         |                       |  |
| Address 1:  |                                       |   |                |  | •   |                         | . R 🔲 E 🔲 W           |  |
| Address 2:  |                                       |   |                | _                                      |   |                         | N / S Line of Section |  |
| ·   |                                       |   |                |  |   |                         | E / W Line of Section |  |
| City:   |                                       |   |                | GF 5 Locati                            | on: Lat:  | , Long:                 | (e.gxxx.xxxxx)        |  |
|   |                                       |   |                | Datuili.                               | NAD27 NAD8  | <del></del>             | GL KB                 |  |
|   |                                       |   |                | I acca None                            |   | Elevation W             |                       |  |
|   |                                       |   |                | - \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | Well Type: (check one)       Oil       Gas       OG       WSW       Other:         SWD Permit #:       ENHR Permit #:         Gas Storage Permit #:       Date Shut-In: |                         |                       |  |
|   |                                       |   |                | SWD P                                  |   |                         |                       |  |
|   |                                       |   |                | Gas Sto                                |   |                         |                       |  |
|   |                                       |   |                |  |   |                         |                       |  |
|   | Conductor                             | Surface   |                | Production                             | Intermediate  | Liner                   | Tubing                |  |
| Size  |                                       |   |                |  |   |                         |                       |  |
| Setting Depth   |                                       |   |                |  |   |                         |                       |  |
| Amount of Cement  |                                       |   |                |  |   |                         |                       |  |
| Top of Cement   |                                       |   |                |  |   |                         |                       |  |
| Bottom of Cement  |                                       |   |                |  |   |                         |                       |  |
| Casing Fluid Level from Surf                            | ace:                                  |   | How Determine  | ed?                                    |   |                         | Date:                 |  |
|   | , ,                                   |   | cks of cement, | to                                     | (bottom) W /  | sacks of cement.        | Date:                 |  |
| Do you have a valid Oil & Ga                            | as Lease?                             | No  |                |  |   |                         |                       |  |
| Depth and Type:   Junk in                               | Hole at                               | Tools in Hole a   | t              | Casing Leaks:                          | Yes No De   | epth of casing leak(s): |                       |  |
| Type Completion: ALT.                                   |                                       |   |                |  |   |                         |                       |  |
| Packer Type:  |                                       |   |                |  |   |                         |                       |  |
| Total Depth:  | Plug Ba                               | ck Depth:   |                | Plug Back Meth                         | od:   |                         |                       |  |
| Geological Date:  |                                       |   |                |  |   |                         |                       |  |
| Formation Name  | Formation                             | Base  |                | Completion Information                 |   |                         |                       |  |
| l   | At:                                   | to  | Feet Pe        | erforation Interval.                   | to  | Feet or Open Hole Inter | val toFeet            |  |
| 2   | At:                                   | to  | Feet Pe        | erforation Interval                    | to  | Feet or Open Hole Inter | val toFeet            |  |
| INDED DENALTY OF DED                                    | IIIDV I LIEDEDV ATTI                  | ECT TU AT TUE IN  | EODMATION A    | PONTAINED HED                          | EIN IS TOLIE AND  | CORRECT TO THE REC      | T OF MV I/NOM/I FDCF  |  |
|   |                                       | Su  | bmitted F      | lectronicall                           | V   |                         |                       |  |
|   |                                       |   |                |  | ,   |                         |                       |  |
| Do NOT Write in This                                    | OT Write in This Date Tested: Results |   |                |  | Date Plugged: Date Repaired: Date Put   |                         |                       |  |
| Space - KCC USE ONLY                                    |                                       |   |                |  |   |                         |                       |  |
| Review Completed by:                                    |                                       |   | Co             | mments:                                |   |                         |                       |  |
| TA Approved: Yes  | Denied Date:                          |   |                |  |   |                         |                       |  |
|   |                                       | Mail to t   | he Appropria   | te KCC Conserv                         | vation Office:  |                         |                       |  |
| Street Syde State Side Stde Sol Set State States States | KCC Dist                              | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801              |                |  |   |                         | Phone 620.682.7933    |  |
| 4   | KCC Diet                              | KCC Dietrict Office #2 - 3450 N. Pock Pood Building 600, Suite 601, Wichita, KS 67226 |                |  |   |                         | 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://kec.ks.gov/

## GOVERNOR JEFF COLYER, M.D.

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

July 31, 2018

Thomas Wade Patteson Patteson, Thomas Wade 484 Osage Trail MOLINE, KS 67353-9718

Re: Temporary Abandonment API 15-019-21409-00-00 MCNOWN 3 SE/4 Sec.28-32S-10E Chautaugua County, Kansas

## Dear Thomas Wade Patteson:

- "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 07/31/2019.
- \* 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 07/31/2019.

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

Very truly yours,

Duane Sims"