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

All blanks must be complete

# TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# Name: Address 1: |                                     |                  |                        | API No. 15  |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
|-------------------------------------|-------------------------------------|------------------|------------------------|---|------------|--------------------------|----------|--------|-------|----------------------------|-----|--|--|------------------------------|---|--------------------|--|--|--|
|                                     |                                     |                  |                        | Spot Description:   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
|                                     |                                     |                  |                        |   | Se         | c Twp                    | S. R     |        | E 🗌 W |                            |     |  |  |                              |   |                    |  |  |  |
| Address 2:                          |                                     |                  |                        |   |            | feet from                | = =      |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| City:                               | State:                              | Zip: +           | •                      | feet from E / W Line of Section   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Contact Person:                     |                                     |                  |                        | GPS Location: Lat:      , Long:         Datum:       NAD27         NAD27       NAD83         WGS84         County:          Elevation:          Well #: |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
|                                     |                                     |                  |                        |   |            |                          |          |        |       | Field Contact Person:      |     |  |  |                              | , | Dil 🗌 Gas 🗌 OG 🗌 W |  |  |  |
|                                     |                                     |                  |                        |   |            |                          |          |        |       | Field Contact Person Phone | :() |  |  | SWD Permit #: ENHR Permit #: |   |                    |  |  |  |
|                                     | ()                                  |                  |                        |   |            | Data Chut                | les.     |        |       |                            |     |  |  |                              |   |                    |  |  |  |
|                                     |                                     | -1               |                        | Spud Date:_   |            | Date Shut-               | -in:     |        |       |                            |     |  |  |                              |   |                    |  |  |  |
|                                     | Conductor                           | Surface          | Pro                    | duction   | Intermedia | ite Liner                |          | Tubing |       |                            |     |  |  |                              |   |                    |  |  |  |
| Size                                |                                     |                  |                        |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Setting Depth                       |                                     |                  |                        |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Amount of Cement                    |                                     |                  |                        |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Top of Cement                       |                                     |                  |                        |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Bottom of Cement                    |                                     |                  |                        |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Casing Fluid Level from Sur         | face:                               | На               | w Determined?          |   |            |                          | Date:    |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Casing Squeeze(s):                  |                                     |                  |                        |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Do you have a valid Oil & Ga        | as Lease? 🗌 Yes                     | No               |                        |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Depth and Type: 🗌 Junk i            | n Hole at                           | Tools in Hole at | Ca                     | sing Leaks: 🗌   | Yes No     | Depth of casing leak(s): |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Type Completion:                    |                                     |                  |                        |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Packer Type:                        |                                     |                  |                        |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
|                                     |                                     |                  |                        |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Total Depth:                        | Plug B                              | ack Depth:       | I                      | Plug Back Metho   | d:         |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Geological Date:                    |                                     |                  |                        |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
| Formation Name                      | n Name Formation Top Formation Base |                  | Completion Information |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |
|                                     | ۸+.                                 | to               | Feet Perfo             | ation Interval _  | to         | Feet or Open Hole        | Interval | to     | Feet  |                            |     |  |  |                              |   |                    |  |  |  |
| 1                                   | Al                                  |                  |                        |   |            |                          |          |        |       |                            |     |  |  |                              |   |                    |  |  |  |

### 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:

|  | 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

August 14, 2018

Emily J. Van Der Gryp Scout Energy Management LLC 4901 LBJ FREEWAY SUITE 300 DALLAS, TX 75244

Re: Temporary Abandonment API 15-093-20552-00-00 MYRTLE 1-A NE/4 Sec.18-21S-37W Kearny County, Kansas

Dear Emily J. Van Der Gryp:

"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 08/14/2019.

\* 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 08/14/2019.

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

Very truly yours,

Michael Maier"