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

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#                         |                 |               |                 | API No. 15-          | API No. 15-    Spot Description: |                              |        |           |  |  |
|--|-----------------|---------------|-----------------|----------------------|----------------------------------|------------------------------|--------|-----------|--|--|
|  |                 |               |                 | Spot Descr           |                                  |                              |        |           |  |  |
|  |                 |               |                 | _                    |                                  |                              |        |           |  |  |
|  |                 |               |                 | _                    |                                  |                              |        |           |  |  |
|  |                 |               |                 |                      |                                  |                              |        |           |  |  |
|  |                 |               |                 | GF 5 LUCall          |                                  |                              |        |           |  |  |
|  |                 |               |                 |                      |                                  |                              |        |           |  |  |
| Contact Person Email:                      |                 |               |                 |                      |                                  | Well #:                      |        |           |  |  |
| Field Contact Person:                      |                 |               |                 | Well Type: (         | (check one) 🗌 🤇                  | Dil 🗌 Gas 🗌 OG 🗌 WSW 📃 O     | ther:  |           |  |  |
| Field Contact Person Phone                 |                 |               |                 |                      | SWD Permit #: ENHR Permit #:     |                              |        |           |  |  |
|  | ()              |               |                 |                      |                                  |                              |        |           |  |  |
|  |                 |               |                 | Spud Date:           |                                  | Date Shut-In:                |        |           |  |  |
|  | Conductor       | Surface       | •               | Production           | Intermedia                       | ate Liner                    | Tubing | g         |  |  |
| Size                                       |                 |               |                 |                      |                                  |                              |        |           |  |  |
| Setting Depth                              |                 |               |                 |                      |                                  |                              |        |           |  |  |
| Amount of Cement                           |                 |               |                 |                      |                                  |                              |        |           |  |  |
| Top of Cement                              |                 |               |                 |                      |                                  |                              |        |           |  |  |
| Bottom of Cement                           |                 |               |                 |                      |                                  |                              |        |           |  |  |
| Casing Fluid Level from Su                 | rface:          |               | How Determir    | ned?                 |                                  | Dat                          | e:     |           |  |  |
| Casing Squeeze(s):                         | to w            | r/sa          | acks of cement, | to                   | w /                              | sacks of cement. Dat         | e:     |           |  |  |
| Do you have a valid Oil & G                | as Lease? 🗌 Yes | No            |                 |                      |                                  |                              |        |           |  |  |
| Depth and Type: Junk                       | in Hole at      | Tools in Hole | at              | Casing Leaks:        | Yes No                           | Depth of casing leak(s):     |        |           |  |  |
|  |                 |               |                 |                      |                                  | Port Collar: w /             |        | of cement |  |  |
| Packer Type:                               |                 |               | ( ) /           |                      |                                  |                              |        |           |  |  |
|  |                 |               |                 |                      |                                  |                              |        |           |  |  |
| Total Depth:                               | Plug B          | ack Depth:    |                 | Plug Back Meth       | od:                              |                              |        |           |  |  |
| Geological Date:                           |                 |               |                 |                      |                                  |                              |        |           |  |  |
| ormation Name Formation Top Formation Base |                 |               | Com             | pletion Information  |                                  |                              |        |           |  |  |
|  | At:             | to            | Feet F          | Perforation Interval | to                               | Feet or Open Hole Interval _ | to     | Feet      |  |  |
| 1  |                 |               |                 |                      |                                  |                              |        |           |  |  |

# 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 🗌 🛛                       | Denied 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 |

ECHOMETER COMPANY 5001 DITTO LANE, WICHITA FALLS, TEXAS 76302 Smith 1/42 1)/13/2018 11-12 .... My W WWW WWWWW WWWWW

### 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

November 20, 2018

REX R. ASHLOCK Colt Energy Inc PO BOX 388 IOLA, KS 66749-0388

Re: Temporary Abandonment API 15-099-23907-00-00 SMITH 11-12 SW/4 Sec.12-31S-17E Labette County, Kansas

Dear REX R. ASHLOCK:

"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 11/20/2019.

\* 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 11/20/2019.

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

Very truly yours,

Russell Hine"