KOLAR Document ID: 1428282

Kansas Corporation Commission Oil & Gas Conservation Division

Form CP-111

July 2017

Form must be Typed

Form must be signed

All blanks must be complete

Phone 620.682.7933

Phone 316.337.7400

Phone 620.902.6450

Phone 785.261.6250

## TEMPORARY ABANDONMENT WELL APPLICATION

| DPERATOR: License#                                       |                                   |                      |         | API No. 15Spot Description:   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
|--|-----------------------------------|----------------------|---------|---|---------------------|--|------------|------------|-------------|---|--|--|------|--------------------------|--|--|--|--|--|
|  |                                   |                      |         |   |                     |  |            |            | Address 1:  |   |  |  |      | Sec                      |  |  |  |  |  |
| Address 2:   |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| City:        State:        Contact Person:        Phone: |                                   |                      |         | feet from Fe / W Line of Section  GPS Location: Lat:, Long:   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
|  |                                   |                      |         |   |                     |  |            |            |             | E |  |  | GLKB |                          |  |  |  |  |  |
|  |                                   |                      |         | Contact Person Email:   |                     |  |            |            | Lease Name: |   |  |  |      |                          |  |  |  |  |  |
|  |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      | Spud Date: Date Shut-In: |  |  |  |  |  |
|  |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Ci   | Conductor                         | Surface              | Pro     | oduction  | Intermediate        | Liner                                    |            | Tubing     |             |   |  |  |      |                          |  |  |  |  |  |
| Size   |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Setting Depth  |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Amount of Cement  Top of Cement                          |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Bottom of Cement   |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
|  |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Casing Fluid Level from Surf Casing Squeeze(s):          |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Do you have a valid Oil & Ga                             | as Lease? Yes                     | No                   |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Depth and Type:   Junk in                                | n Hole at                         | Tools in Hole at     | Ca      | sing Leaks:   | Yes No Depth        | of casing leak(s):                       |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Type Completion: ALT.                                    |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
|  |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
|  | e: Size: Inch<br>Plug Back Depth: |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
|  | 1 ldg Bac                         |                      |         | rag back weth   | ou                  |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Geological Date:   |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Formation Name   |                                   | Top Formation Base   |         |   | •                   | Information                              |            |            |             |   |  |  |      |                          |  |  |  |  |  |
|  |                                   |                      |         | rforation Interval to Feet or Open Hole Interval to Feet rforation Interval to Feet or Open Hole Interval to Feet |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| <u> </u>   | At:                               | to Feet              | Perfo   | ration Interval -   | to Fe               | et or Open Hole                          | Interval   | toFeet     |             |   |  |  |      |                          |  |  |  |  |  |
| INDED DENALTY OF DED                                     | IIIDV I LIEDEDV ATTE              | ET TUAT THE INCODMAT | TION CO | NITAINEN LIEB   | EIN IS TOLIE AND CO | ADDECT TO THE I                          | DEST OF MV | KNOW! EDGE |             |   |  |  |      |                          |  |  |  |  |  |
|  |                                   | Submitte             | d Fle   | ctronicall  | V                   |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
|  |                                   | Cubilinue            | )G      | oti oriiodii,   | y                   |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Do NOT Write in This                                     | Date Tested: Results:             |                      | sults:  | Date Plugged:   |                     | Date Repaired: Date Put Back in Service: |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Space - KCC USE ONLY                                     |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| Review Completed by:                                     | eview Completed by: Comm          |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
| TA Approved: Yes   | Denied Date:                      |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
|  |                                   |                      |         |   |                     |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |
|  |                                   | Mail to the Appr     | opriate | KCC Conserv   | ation Office:       |  |            |            |             |   |  |  |      |                          |  |  |  |  |  |

KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801

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

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

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

## 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

November 27, 2018

Tisha Love Castelli Exploration, Inc. 6908 NW 112TH OKLAHOMA CITY, OK 73162-2976

Re: Temporary Abandonment API 15-033-20426-00-00 BIDDLE 2 SW/4 Sec.07-33S-16W Comanche County, Kansas

## Dear Tisha Love:

- "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 11/27/2019.
- \* 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 11/27/2019.

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

Very truly yours,

Michael Maier"