## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#          |                              |             |           |          | API No. 15-   |                |              |                 |        |        |              |
|-----------------------------|------------------------------|-------------|-----------|----------|---|----------------|--------------|-----------------|--------|--------|--------------|
| Name:                       |                              |             |           |          | Spot Description:   |                |              |                 |        |        |              |
| Address 1:                  |                              |             |           |          |   | S              | ec           | Twp             | S. R   | [      | EW           |
| Address 2:                  |                              |             |           |          |   |                |              |                 |        |        |              |
| City:                       | State:                       | Zip:        | +         |          |   |                |              | _ feet from _   |        | W Line | e of Section |
| Contact Person:             |                              |             |           |          | GPS Location: Lat:, Long:, e.gxxx.xxxxx) Datum: NAD27 NAD83 WGS84 |                |              |                 |        |        |              |
| Phone:()                    |                              |             |           |          |   |                |              |                 |        |        | GL 🗌 KB      |
| Contact Person Email:       |                              |             |           |          |   | ə:             |              |                 |        |        |              |
| Field Contact Person:       |                              |             |           |          | Well Type: (d   | check one) 🗌   | Oil Gas      |                 | N 🗌 Ot | her:   |              |
| Field Contact Person Phon   |                              |             |           |          | SWD Permit #: ENHR Permit #:                                      |                |              |                 |        |        |              |
|                             | 0.()                         |             |           |          |   | rage Permit #: |              |                 |        |        |              |
|                             |                              |             |           |          | Spud Date:  |                |              | Date Shut-In    | 1:     |        |              |
|                             | Conductor                    | Surfa       | ace       | Produ    | iction  | Intermedi      | iate         | Liner           |        | Tubi   | ing          |
| Size                        |                              |             |           |          |   |                |              |                 |        |        |              |
| Setting Depth               |                              |             |           |          |   |                |              |                 |        |        |              |
| Amount of Cement            |                              |             |           |          |   |                |              |                 |        |        |              |
| Top of Cement               |                              |             |           |          |   |                |              |                 |        |        |              |
| Bottom of Cement            |                              |             |           |          |   |                |              |                 |        |        |              |
| Casing Fluid Level from Su  | uface.                       |             | How Deter | rmined?  |   |                |              |                 | Date   |        |              |
| Casing Squeeze(s):          |                              |             |           |          |   |                |              |                 |        |        |              |
|                             | · · · ·                      |             |           | (t       | op)   | (bottom)       |              |                 |        |        |              |
| Do you have a valid Oil & C |                              |             |           |          |   |                |              |                 |        |        |              |
| Depth and Type: Unk         | in Hole at                   | Tools in Ho | le at     | Casir    | ng Leaks:   | Yes No         | Depth of cas | sing leak(s): _ |        |        |              |
| Type Completion:            | Г. I 🗌 ALT. II Depth         | of: DV Too  | )l:       | w /      | sacks   | of cement      | Port Collar: | (denth)         | _ w /  | sacl   | k of cement  |
| Packer Type:                |                              |             |           |          |   |                |              | (uopin)         |        |        |              |
| Total Depth:                | Plug Back Depth:             |             |           | Plu      | Plug Back Method:   |                |              |                 |        |        |              |
| Geological Date:            |                              |             |           |          |   |                |              |                 |        |        |              |
| Formation Name              | Formation Top Formation Base |             |           |          | Completion Information  |                |              |                 |        |        |              |
| 1                           | At:                          | to          | Feet      | Perforat | ion Interval _  | to             | Feet or      | Open Hole In    | terval | to     | Feet         |
| 2                           | At:                          | to          | Feet      | Perforat | ion Interval _  | to             | Feet or      | Open Hole In    | terval | to     | Feet         |
|                             |                              |             |           |          |   |                |              |                 |        |        |              |

## 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:

| Non-         Non- <th< th=""><th>KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801</th><th>Phone 620.682.7933</th></th<> | 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 |

Conservation Division District Office No. 3 137 E. 21st Street Chanute, KS 66720



Phone: 620-902-6450 http://kcc.ks.gov/

Dwight D. Keen, Chair Shari Feist Albrecht, Commissioner Jay Scott Emler, Commissioner Laura Kelly, Governor

January 24, 2019

Roscoe G. Jackson II Jackson Brothers, L.L.C. 116 E 3RD ST EUREKA, KS 67045-1747

Re: Temporary Abandonment API 15-073-23294-00-00 HONHART 17 SW/4 Sec.07-26S-10E Greenwood County, Kansas

Dear Roscoe G. Jackson II:

"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 01/24/2020.

\* 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 01/24/2020.

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

Very truly yours,

Mike Heffern"