KOLAR Document ID: 1438385

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

July 2017 Form must be Typed

## TEMPORARY ABANDONMENT WELL APPLICATION

Form must be signed All blanks must be complete

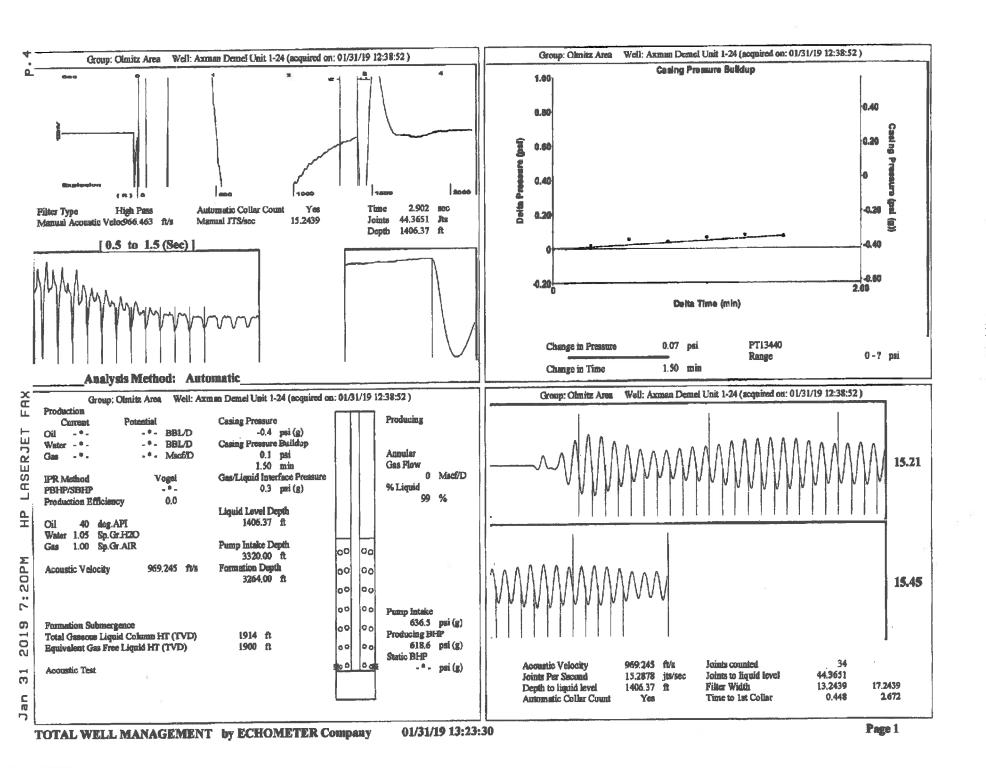
Phone 620.902.6450

Phone 785.261.6250

| OPERATOR: License#                     |             |  |                            |          | API No. 15  Spot Description:   |                          |                      |                           |
|--|-------------|--|----------------------------|----------|---|--------------------------|----------------------|---------------------------|
|  |             |  |                            |          |   |                          |                      |                           |
|  |             |  |                            |          | Address 2:  |                          |                      |                           |
| City: State: Zip: +                    |             |  |                            |          |   |                          |                      | E / W Line of Section     |
| Contact Person:                        |             |  |                            |          | GPS Location: Lat:, Long:   |                          |                      |                           |
|  |             |  |                            |          | Datum: NAD27 NAD83 WGS84  |                          |                      |                           |
| Phone:()                               |             |  |                            |          | County: Elevation: GL   |                          |                      |                           |
| Contact Person Email:                  |             |  |                            |          | Well Type: (check one)       Oil       Gas       OG       WSW       Other:         SWD Permit #:       ENHR Permit #: |                          |                      |                           |
|  |             |  |                            |          |   |                          |                      |                           |
|  |             |  |                            |          | Spud Date:  |                          | Date Shut-In: _      |                           |
|  | Cond        | uctor  | Surface                    | Pr       | oduction  | Intermediate             | Liner                | Tubing                    |
| Size                                   |             |  |                            |          |   |                          |                      |                           |
| Setting Depth                          |             |  |                            |          |   |                          |                      |                           |
| Amount of Cement                       |             |  |                            |          |   |                          |                      |                           |
| Top of Cement                          |             |  |                            |          |   |                          |                      |                           |
| Bottom of Cement                       |             |  |                            |          |   |                          |                      |                           |
| Casing Fluid Level from Sur            | face:       |  | How De                     | termined | >   |                          |                      | Date:                     |
| · ·                                    |             |  |                            |          |   |                          |                      | . Date:                   |
| (top)                                  | (b          | ottom)   |                            |          | (top)   | (bottom)                 |                      |                           |
| Do you have a valid Oil & Ga           | as Lease?   | Yes  | No                         |          |   |                          |                      |                           |
| Depth and Type:                        | n Hole at _ |  | Tools in Hole at           | Ca       | asing Leaks:  | Yes No Depth o           | of casing leak(s):   |                           |
|  |             |  |                            |          |   |                          |                      | v / sack of cement        |
| Packer Type:                           |             |  |                            |          |   |                          | (dopul)              |                           |
| Total Depth:                           |             | Plug Ba  | ck Depth:                  |          | Plug Back Meth  | od:                      |                      |                           |
| Geological Date:                       |             |  |                            |          |   |                          |                      |                           |
| · ·                                    |             | Commention.  | Ton Formation Dage         |          |   | Completion               |                      |                           |
| Formation Name                         |             |  | Top Formation Base         |          |   | Completion I             |                      |                           |
| 1                                      |             |  | to Feet                    |          |   |                          |                      | rval toFeet               |
| 2                                      |             | At:  | to Feet                    | t Perfo  | oration Interval  | to Fee                   | t or Open Hole Inter | rval toFeet               |
| IINDED DENALTY OF DED                  | швутце      | DEDV ATTE  | CETTUAT THE INCORMA        | ATION CO | NITAINED HEE  | EIN IS TOLIE AND COL     | DECTTO THE BEC       | T OF MV KNOW! EDGE        |
|  |             |  | Submitt                    | ed Ele   | ectronicall   | V                        |                      |                           |
|  |             |  |                            |          |   | ,                        |                      |                           |
| Do NOT Write in This                   | Da          | ate Tested:  |                            | esults:  |   | Date Plugged:            | Date Repaired: [     | Date Put Back in Service: |
| Space - KCC USE ONLY                   |             |  |                            |          |   |                          |                      |                           |
| Review Completed by:                   |             |  |                            | Comi     | ments:  |                          |                      |                           |
| TA Approved: Yes                       | Denied      | Date:  |                            |          |   |                          |                      |                           |
|  |             |  | Mail to the Arm            | ropulate | VCC Camara  | ration Office:           |                      |                           |
|  |             | 1406 =:  | Mail to the App            |          |   |                          |                      |                           |
|  | 三           | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801 |                            |          |   | Phone 620.682.7933       |                      |                           |
| Sales tops the top to best the top the |             | KCC Distr  | rict Office #2 - 3450 N. R | ock Road | , Building 600,   | Suite 601, Wichita, KS 6 | 7226                 | 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



Conservation Division District Office No. 4 2301 E. 13th Street Hays, KS 67601-2651



Phone: 785-261-6250 Fax: 785-625-0564 http://kcc.ks.gov/

Laura Kelly, Governor

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

February 08, 2019

Loveness Mpanje F. G. Holl Company L.L.C. 9431 E CENTRAL STE 100 WICHITA, KS 67206-2563

Re: Temporary Abandonment API 15-009-25057-00-00 AXMAN-DEMEL 1-24 W/2 Sec.24-17S-15W Barton County, Kansas

## Dear Loveness Mpanje:

"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 02/08/2020.

- \* 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 02/08/2020.

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

Very truly yours,

**RICHARD WILLIAMS"**