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

1369389

# **TEMPORARY ABANDONMENT WELL APPLICATION**

| OPERATOR: License#            |                              |              |              |           | API No. 15 Spot Description:                                       |                  |                      |                |          |             |              |
|-------------------------------|------------------------------|--------------|--------------|-----------|--|------------------|----------------------|----------------|----------|-------------|--------------|
|                               |                              |              |              |           |  |                  |                      |                |          |             |              |
| Address 1:                    |                              |              |              |           | <u> </u>   | Se               | C                    | Twp            | S. R     |             | E            |
| Address 2:                    |                              |              |              |           |  |                  |                      |                |          |             |              |
| City:                         | State:                       | Zip:         | +            |           |  | on: Lat:         |                      | _ feet from _  | _E /     | W Line      | e of Section |
| Contact Person:               |                              |              |              |           |  |                  | .g. xx.xxxxx)<br>D83 | , Long:        | (        | e.gxxx.xxxx | <)           |
| Phone:()                      |                              |              |              |           | Datum:         NAD27         NAD83         WGS84           County: |                  |                      |                |          |             |              |
| Contact Person Email:         |                              |              |              |           | Lease Name   | ə:               |                      |                | Well #:  |             |              |
| Field Contact Person:         |                              |              |              |           |  | check one) 🗌 (   |                      |                |          |             |              |
| Field Contact Person Phone:   |                              |              |              |           | SWD Permit #: ENHR Permit #:                                       |                  |                      |                |          |             |              |
|                               | ( )                          |              |              |           | Gas Sto  | rage Permit #: _ |                      | Date Shut-In:  |          |             |              |
|                               |                              |              |              |           | Spuu Dale.   |                  |                      | Date Shut-III. | ·        |             |              |
|                               | Conductor                    | Surfa        | ce           | Proc      | uction   | Intermedia       | ate                  | Liner          |          | Tubi        | ng           |
| Size                          |                              |              |              |           |  |                  |                      |                |          |             |              |
| Setting Depth                 |                              |              |              |           |  |                  |                      |                |          |             |              |
| Amount of Cement              |                              |              |              |           |  |                  |                      |                |          |             |              |
| Top of Cement                 |                              |              |              |           |  |                  |                      |                |          |             |              |
| Bottom of Cement              |                              |              |              |           |  |                  |                      |                |          |             |              |
| Casing Fluid Level from Surfa | ace:                         |              | _ How Deter  | rmined? _ |  |                  |                      |                | Date:    | :           |              |
| Casing Squeeze(s):            | to w                         | /            | sacks of cem | ent,      | (top) to   | w /              | S                    | acks of cemer  | nt. Date | :           |              |
| Do you have a valid Oil & Ga  | is Lease? Yes                | No           |              |           |  |                  |                      |                |          |             |              |
| Depth and Type: Unk in        | Hole at                      | Tools in Hol | e at         | Cas       | ng Leaks:  | Yes 🗌 No         | Depth of cas         | ing leak(s):   |          |             |              |
| Type Completion:              |                              |              |              |           |  |                  |                      |                |          |             | k of cement  |
|                               |                              |              | ,            |           |  |                  |                      | (depth)        |          |             |              |
| Packer Type:                  |                              |              |              |           |  |                  |                      |                |          |             |              |
| Total Depth:                  | Plug B                       | ack Depth:   |              | P         | lug Back Metho   | od:              |                      |                |          |             |              |
| Geological Date:              |                              |              |              |           |  |                  |                      |                |          |             |              |
| Formation Name                | Formation Top Formation Base |              |              |           | Completion Information   |                  |                      |                |          |             |              |
| 1                             | At:                          | to           | Feet         | Perfora   | ation Interval _   | to               | Feet or              | Open Hole Int  | erval    | 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                             | 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 |



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

Pat Apple, Chairman Shari Feist Albrecht, Commissioner Jay Scott Emler, Commissioner Sam Brownback, Governor

October 10, 2017

Harold Murburger TEHI Illinois, LLC PO BOX 672 OLNEY, IL 62450

Re: Temporary Abandonment API 15-125-25246-00-00 WITWER 2 SE/4 Sec.06-35S-17E Montgomery County, Kansas

Dear Harold Murburger:

Your application for Temporary Abandonment (TA) for the above-listed well is denied for the following reasons(s):

## operator going to check fluid level per conversation; not actually read this year

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by November 07, 2017.

# This deadline does NOT override any compliance deadline given to you in any Commission Order.

You may contact me if you have any questions.

Sincerely, Duane Sims KCC DISTRICT 3