Form CP-111
July 2017
Form must be Typed
Form must be signed
All blanks must be complete

# TEMPORARY ABANDONMENT WELL APPLICATION

State   Zip:	OPERATOR: License#				API No. 15-						
State   Zip	Name:				Spot Descrip	ption:					
	Address 1:					Sec.	T\	vp S	i. R	[ E	:w
State   Zip:	Address 2:							=	=		
Contact Person:	City:	State:	feet from L E / L W Line of Section								
Phone:(		GPS Location: Lat:, Long:									
Lease Name:											
Well Type: (check one)   Oil   Gas   OG   WSW   Other:   SWD Permit #:   SND Date Shut-in:   SND Date Shut-i	,										
SWD Permit #:					Well Type: (a	check one) 🗌 Oil	Gas (	og 🗌 wsw	Other:		
Gas Storage Permit #:									ermit #:		
Conductor   Surface   Production   Intermediate   Liner   Tubir	ricia comacti cisoni i none	()									
Size  Setting Depth  Amount of Cement  Top of Cement  Bottom of Cement  Bottom of Cement  Casing Fluid Level from Surface: How Determined? Date: Casing Squeeze(s): (top) to (bottom) w/ sacks of cement. Date: Casing Squeeze(s): (top) to (bottom) w/ sacks of cement. Date: Casing Squeeze(s): (top) to (bottom) w/ sacks of cement. Date: Casing Squeeze(s): (top) to (bottom) w/ sacks of cement. Date: Casing Squeeze(s): (top) to (bottom) w/ sacks of cement. Date: Casing Squeeze(s): (top) to (bottom) w/ sacks of cement. Date: Casing Squeeze(s): (top) to (bottom) w/ sacks of cement. Date: Casing Squeeze(s): (top) to (bottom) w/ sacks of cement. Date: Casing Squeeze(s): (top) to (depth) w/ sacks of cement. Date: Casing Squeeze(s): (top) to (depth) w/ sacks of cement. Date: Casing Squeeze(s): (depth) w/ sacks of cement. Date: Squeeze(s): (depth) w/ sacks of cement. Date: Casing S					Spud Date:		[	Date Shut-In: _			
Setting Depth Amount of Cement Top of Cement Bottom of Cement  Casing Fluid Level from Surface:		Conductor	Surface	Pro	oduction	Intermediate		Liner		Tubing	
Amount of Cement  Top of Cement  Bottom of Cement  Casing Fluid Level from Surface: How Determined? Date: Casing Squeeze(s): (top) to (bottom) w/ sacks of cement, (top) to (bottom) w/ sacks of cement. Date: Do you have a valid Oil & Gas Lease? Yes No Depth and Type: Junk in Hole at (depth) Tools in Hole at (depth) W/ sacks of cement Port Collar: (depth) w/ sacks of cement Port Collar: Feet  Type Completion: ALT. I ALT. II Depth of: DV Tool: (depth) W/ sacks of cement Port Collar: (depth) W/ sacks of cement Port Collar: Feet  Total Depth: Plug Back Depth: Plug Back Method:  Geological Date:  Formation Name Formation Top Formation Base Completion Information  1. At: to Feet Perforation Interval to Feet or Open Hole Interval to Submitted Electronically  Submitted Electronically	Size										
Top of Cement  Bottom of Cement  Casing Fluid Level from Surface:	Setting Depth										
Bottom of Cement  Casing Fluid Level from Surface: How Determined? Date: Casing Squeeze(s): (top) to (bottom) w/ sacks of cement, (top) to (bottom) w/ sacks of cement. Date: Do you have a valid Oil & Gas Lease? Yes No Depth and Type: Junk in Hole at (depth) Tools in Hole at (depth) Size: No Depth of casing leak(s): Type Completion: ALT. I ALT. II Depth of: DV Tool: (depth) w/ sacks of cement Port Collar: w/ sacks of cement Port Collar: w/ sacks of cement Port Collar: W/ sacks Type: Size: Inch Set at: Feet  Total Depth: Plug Back Depth: Plug Back Method: Completion Information  1. At: to Feet Perforation Interval to Feet or Open Hole Interval to Submitted Electronically  Do NOT Write in This Date Tested: Results: Date Plugged: Date Repaired: Date Put Back in See	Amount of Cement										
Casing Fluid Level from Surface:	Top of Cement										
Casing Squeeze(s):	Bottom of Cement										
Submitted Electronically  Do NOT Write in This  Date Tested:  Results:  Date Plugged:  Date Repaired:  Date Put Back in Se	Depth and Type:	n Hole at	Tools in Hole at	w / Inch	sacks Set at:	of cement Po	rt Collar: Feet  tion Informa	(depth) W	v /	sack of	
Submitted Electronically  Do NOT Write in This Date Tested: Results: Date Plugged: Date Repaired: Date Put Back in Se	2	At:	to Fee	t Perfo	ration Interval _	to	Feet or O	pen Hole Inter	rval	to	Feet
	Do NOT Write in This	Date Tested:	Submitt	ted Ele		<i>'</i>					
Review Completed by: Comments:	Review Completed by:			Comm	nents:						
TA Approved: Yes Denied Date:	TA Approved: Yes										

### Mail to the Appropriate KCC Conservation Office:

No.	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
The control of the co	KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720	Phone 620.902.6450
Size State S	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.261.6250

## STATE OF KANSAS

Corporation Commission Conservation Division District Office No. 2 3450 N. Rock Road Building 600, Suite 601 Wichita, KS 67226



Phone: 316-337-7400 Fax: 316-630-4005 http://kee.ks.gov/

#### GOVERNOR JEFF COLYER, M.D.

SHARI FEIST ALBRECHT, CHAIR | JAY SCOTT EMLER, COMMISSIONER | DWIGHT D. KEEN, COMMISSIONER

June 01, 2018

Chasen Gann Hillenburg Oil Co., a General Partnership 11600 S LYNN LANE RD BROKEN ARROW, OK 74011-4021

Re: Temporary Abandonment API 15-015-00380-00-00 LATHROP SOUTH 18 SW/4 Sec.17-23S-04E Butler County, Kansas

#### Dear Chasen Gann:

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

### **High Fluid Level**

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by June 29, 2018.

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, Jonathan Hill KCC DISTRICT 2