KOLAR Document ID: 1439201

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

July 2017

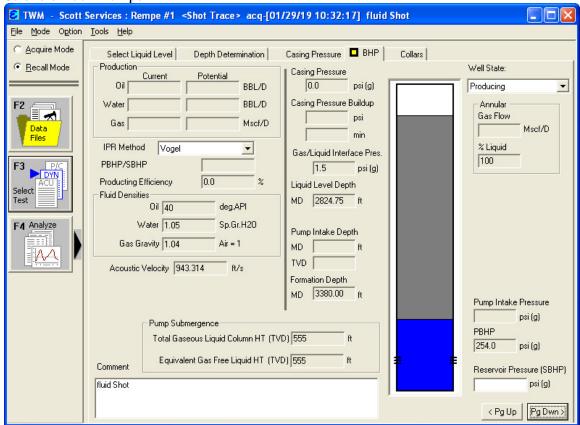
## TEMPORARY ABANDONMENT WELL APPLICATION

| Form must be Typed         |  |  |  |  |  |  |  |
|----------------------------|--|--|--|--|--|--|--|
| Form must be signed        |  |  |  |  |  |  |  |
| II blanks must be complete |  |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |  |

| OPERATOR: License#  |                       |                           |              | API No. 15-                    | API No. 15  |                                     |                        |  |  |
|---|-----------------------|---------------------------|--------------|--------------------------------|---|-------------------------------------|------------------------|--|--|
| Name:   |                       |                           |              | Spot Descr                     | iption:   |                                     |                        |  |  |
| Address 1:  |                       |                           |              |                                |   | Twp S.                              |                        |  |  |
| Address 2:  |                       |                           |              |                                |   | feet from N                         | =                      |  |  |
| City:   | State:                | _ Zip: + _                |              |                                |   | feet from E                         | _                      |  |  |
| Contact Person: Phone:(   |                       |                           |              | Datum:                         | GPS Location: Lat:         (e.g. xx.xxxxx)         , Long:         (e.gxxx.xxxxxx)           Datum:         NAD27         NAD83         WGS84 |                                     |                        |  |  |
|   |                       |                           |              | County:   Elevation:   GL   KB |   |                                     |                        |  |  |
| Contact Person Email:   |                       |                           |              |                                |   | Wel                                 |                        |  |  |
| Field Contact Person:   |                       |                           |              | Well Type: (                   | Well Type: (check one) Oil Gas OG WSW Other:  |                                     |                        |  |  |
| Field Contact Person Phone                                      | e: ( )                |                           |              |                                |   | ENHR Perr                           | mit #:                 |  |  |
|   | ,                     |                           |              |                                | orage Permit #:   | Date Shut-In:                       |                        |  |  |
|   | Conductor             | 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                       | Determined   | >                              |   | [                                   | Jate:                  |  |  |
|   |                       |                           |              |                                |   | sacks of cement. [                  |                        |  |  |
|   | in Hole at(depth)     | Tools in Hole at(a        | w / .        | sacks                          | s of cement Po  | epth of casing leak(s): w / w / w / |                        |  |  |
| Total Depth:  | Plug Ba               | ck Depth:                 |              | Plug Back Meth                 | od:   |                                     |                        |  |  |
| Geological Date:  |                       |                           |              |                                |   |                                     |                        |  |  |
| Formation Name  | Formation             | Top Formation Base        |              |                                | Comple  | tion Information                    |                        |  |  |
| 1   | At:                   | to Fe                     | eet Perfo    | oration Interval               | to  | Feet or Open Hole Interva           | al toFeet              |  |  |
| 2   | At:                   | to Fe                     | eet Perfo    | oration Interval -             | to  | Feet or Open Hole Interva           | al toFeet              |  |  |
| HINDED DENALTY OF RED   | DILIDY I LIEDEDY ATTI |                           |              | ectronically                   |   | CORRECT TO THE REST                 | OE MY KNOM! EDGE       |  |  |
| Do NOT Write in This<br>Space - KCC USE ONLY                    | Date Tested:          |                           | Results:     |                                | Date Plugged:   | Date Repaired: Dat                  | e Put Back in Service: |  |  |
| Review Completed by:  |                       |                           | Comr         | ments:                         |   |                                     |                        |  |  |
| TA Approved: Yes  | Denied Date:          |                           |              |                                |   |                                     |                        |  |  |
|   |                       | Mail to the A             | ppropriate   | KCC Conserv                    | ation Office:   |                                     |                        |  |  |
| Depth Spile Steel Steel Steel Steel and Spile Steel Spile Steel | KCC Dist              | rict Office #1 - 210 E. F | rontview, Su | ite A, Dodge Ci                | ty, KS 67801  |                                     | Phone 620.682.7933     |  |  |
| Table tops the box tops to the tops tops tops tops              | KCC Dist              | rict Office #2 - 3450 N.  | Rock Road    | , Building 600,                | Suite 601, Wichita,   | KS 67226                            | Phone 316.337.7400     |  |  |

| States today trans trace rates and not bearing marked many time pro- | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801               | Phone 620.682.7933 |
|--|--|--------------------|
| State Same for the same same same same same same same sam            | 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 |
| the true large that the large true true true true true true true tru | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                      | Phone 785.261.6250 |

Stroke of luck Rempe #1



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 07, 2019

Ken Walker Stroke of Luck Energy & Exploration LLC PO BOX 98 TECUMSEH, KS 66542-0098

Re: Temporary Abandonment API 15-163-20203-00-01 REMPE 1 SE/4 Sec.18-09S-19W Rooks County, Kansas

## Dear Ken Walker:

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

Wireline test / fluid level test must be witnessed Need to run a State Witnessed wireline measure for fluid level & PBTD

Pursuant to K.A.R. 82-3-111, the well must be plugged, or returned to service, or obtain temporary abandonment status by March 07, 2019.

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, RICHARD WILLIAMS KCC DISTRICT 4