## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#                 |                 |                           |                | API No. 15          |                   |                |                               |        |          |
|------------------------------------|-----------------|---------------------------|----------------|---------------------|-------------------|----------------|-------------------------------|--------|----------|
|                                    |                 |                           |                | Spot Description:   |                   |                |                               |        |          |
| Address 1:                         |                 |                           |                |                     | Se                | c 1            | Гwp S. R.                     |        | E 🗌 W    |
| Address 2:                         |                 |                           |                |                     |                   |                | feet from N /                 |        |          |
| City:   Zip:  +    Contact Person: |                 |                           |                |                     |                   |                |                               |        |          |
|                                    |                 |                           |                |                     |                   |                |                               |        |          |
| Contact Person Email:              |                 |                           |                |                     |                   |                | Well #                        |        |          |
| Field Contact Person:              |                 |                           |                | Well Type: (        | check one) 🗌 🤇    | Dil 🗌 Gas 🗌    | og 🗌 wsw 🗌 d                  | Other: |          |
| Field Contact Person Phone         |                 |                           |                |                     |                   |                | ENHR Permit                   | #:     |          |
|                                    | ()              |                           |                |                     | orage Permit #: _ |                |                               |        |          |
|                                    |                 |                           |                | Spud Date:          |                   |                | Date Shut-In:                 |        |          |
|                                    | Conductor       | Surface                   | e P            | Production          | Intermedia        | ite            | Liner                         | Tubing | 9        |
| Size                               |                 |                           |                |                     |                   |                |                               |        |          |
| Setting Depth                      |                 |                           |                |                     |                   |                |                               |        |          |
| Amount of Cement                   |                 |                           |                |                     |                   |                |                               |        |          |
| Top of Cement                      |                 |                           |                |                     |                   |                |                               |        |          |
| Bottom of Cement                   |                 |                           |                |                     |                   |                |                               |        |          |
| Casing Fluid Level from Sur        | ace:            |                           | How Determined | 1?                  |                   |                | Dat                           | te:    |          |
| Casing Squeeze(s):                 |                 |                           |                |                     |                   |                |                               |        |          |
| Do you have a valid Oil & Ga       | as Lease? 🗌 Yes | No                        |                |                     |                   |                |                               |        |          |
| Depth and Type: 🗌 Junk in          | n Hole at       | Tools in Hole             | at C           | Casing Leaks:       | Yes No            | Depth of casi  | ng leak(s):                   |        |          |
|                                    |                 |                           |                |                     |                   |                |                               |        |          |
| Type Completion: ALT.              |                 |                           |                |                     |                   |                | (depth)                       | 3000 0 | Ji cemen |
| Packer Type:                       | Size: .         |                           | Inc            | h Set at:           |                   | _ Feet         |                               |        |          |
|                                    | Plug B          | Plug Back Depth: Plug Bac |                |                     | od:               |                |                               |        |          |
| Total Depth:                       | 1 log D         |                           |                |                     |                   |                |                               |        |          |
| Total Depth:                       |                 |                           |                |                     |                   |                |                               |        |          |
| Geological Date:                   |                 | n Top Formation           | Base           |                     | Comp              | pletion Inform | ation                         |        |          |
|                                    | Formatio        | •                         |                | foration Interval _ |                   |                | ation<br>Open Hole Interval _ | 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:

| $\begin{array}{ c c c c c c c c c c c c c c c c c c c$ | 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. 1 210 E. Frontview, Suite A Dodge City, KS 67801



Phone: 620-682-7933 http://kcc.ks.gov/

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

May 07, 2019

Melissa Imler Casillas Petroleum Corp 348 RD DD SATANTA, KS 67870

Re: Temporary Abandonment API 15-081-21264-00-00 GOVERNMENT B 2 SW/4 Sec.12-27S-34W Haskell County, Kansas

Dear Melissa Imler:

"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 05/07/2020.

\* 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 05/07/2020.

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

Very truly yours,

Michael Maier"