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

## **TEMPORARY ABANDONMENT WELL APPLICATION**

| OPERATOR: License#   |   |                     |                     | API No. 15-  |  |  |                      |  |                                 |
|--|---|---------------------|---------------------|--|--|--|----------------------|--|---------------------------------|
| Name:  |   |                     |                     |  |  |  |                      |  |                                 |
| Address 1:   |   |                     |                     |  | •  | Twp S. R.                                |                      |  |                                 |
| Address 2:   |   |                     |                     |  |  | feet from N /                            |                      |  |                                 |
|  |   |                     |                     | feet from E / W Line of Section  |  |  |                      |  |                                 |
| City:  |   |                     |                     | GPS Location: Lat:, Long:, Long:   |  |  |                      |  |                                 |
|  |   |                     |                     |  |  | vvGS84<br>evation:                       | □GL□KI               |  |                                 |
| Phone:( )  |   |                     |                     | Lease Name:         Well #:           Well Type: (check one)         Oil Gas OG WSW Other: |  |  |                      |  |                                 |
|  |   |                     |                     |  |  |  |                      |  | Field Contact Person Phone: ( ) |
|  | ,   |                     |                     | _  | orage Permit #:                          | <br>Date Shut-In:                        |                      |  |                                 |
|  | Conductor   | Surface             | Pro                 | duction  | Intermediate                             | Liner                                    | Tubing               |  |                                 |
| Size   |   |                     |                     |  |  |  |                      |  |                                 |
| Setting Depth  |   |                     |                     |  |  |  |                      |  |                                 |
| Amount of Cement   |   |                     |                     |  |  |  |                      |  |                                 |
| Top of Cement  |   |                     |                     |  |  |  |                      |  |                                 |
| Bottom of Cement   |   |                     |                     |  |  |  |                      |  |                                 |
| Casing Squeeze(s):  (top)  Do you have a valid Oil & Ga  Depth and Type: | as Lease? Yes   n Hole at (depth)  I ALT. II Depth  Size: Plug Ba | No Tools in Hole at | Ca<br>w / _<br>Inch | sing Leaks: sacks Set at:  | Yes No Depth of Soft Completion  To Feet | of casing leak(s): w /<br>ollar: w /<br> | sack of cemer        |  |                                 |
| HINDED BENALTY OF BED  | IIIDV I UEDEDV ATTE   |                     |                     | ctronically  |  | DDEATTA THE DEAT AR                      | · MV I/NOM/I EDGE    |  |                                 |
| Do NOT Write in This<br>Space - KCC USE ONLY                             | Date Tested:  | R                   | Results:            |  | Date Plugged:                            | Date Repaired: Date R                    | Put Back in Service: |  |                                 |
| Review Completed by:   |   |                     | Comm                | nents:   |  |  |                      |  |                                 |
| TA Approved: Yes   | Denied Date:  |                     |                     |  |  |  |                      |  |                                 |
|  |   | Mail to the App     | propriate l         | KCC Conserv  | vation Office:                           |  |                      |  |                                 |

| Name have been now toke tok and from homes mad man for home  | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801               | Phone 620.682.7933 |
|--|--|--------------------|
| 1000 1000 1000 1000 1000 1000 1000 100   | 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 |

TOTAL WELL MANAGEMENT by ECHOMETER Company

06/17/19 14:53:29

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Conservation Division District Office No. 1 210 E. Frontview, Suite A Dodge City, KS 67801



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

Laura Kelly, Governor

Dwight D. Keen, Chair Shari Feist Albrecht, Commissioner Susan K. Duffy, Commissioner

June 18, 2019

Katherine McClurkan Merit Energy Company, LLC 13727 Noel Road, Suite 1200 Dallas, TX 75240

Re: Temporary Abandonment API 15-129-20322-00-01 Low H 1 SW/4 Sec.04-33S-40W Morton County, Kansas

## Dear Katherine McClurkan:

- "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 06/18/2020.
- \* 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 06/18/2020.

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

Very truly yours,

Michael Maier"