

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 Contact Person Email: _____
 Field Contact Person: _____
 Field Contact Person Phone: (_____) _____

API No. 15- _____
 Spot Description: _____
 _____ - _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ E W
 _____ feet from N / S Line of Section
 _____ feet from E / W Line of Section
 GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)
 Datum: NAD27 NAD83 WGS84
 County: _____ Elevation: _____ GL KB
 Lease Name: _____ Well #: _____
 Well Type: (check one) Oil Gas OG WSW Other: _____
 SWD Permit #: _____ ENHR Permit #: _____
 Gas Storage Permit #: _____
 Spud Date: _____ Date Shut-In: _____

| | Conductor | Surface | Production | Intermediate | Liner | Tubing |
|------------------|-----------|---------|------------|--------------|-------|--------|
| Size | | | | | | |
| Setting Depth | | | | | | |
| Amount of Cement | | | | | | |
| Top of Cement | | | | | | |
| Bottom of Cement | | | | | | |

Casing Fluid Level from Surface: _____ How Determined? _____ Date: _____
 Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
(top) (bottom) (top) (bottom)
 Do you have a valid Oil & Gas Lease? Yes No
 Depth and Type: Junk in Hole at _____ Tools in Hole at _____ Casing Leaks: Yes No Depth of casing leak(s): _____
(depth) (depth)
 Type Completion: ALT. I ALT. II Depth of: DV Tool: _____ w / _____ sacks of cement Port Collar: _____ w / _____ sack of cement
(depth) (depth)
 Packer Type: _____ Size: _____ Inch Set at: _____ Feet
 Total Depth: _____ Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

| Formation Name | Formation Top | Formation Base | Completion Information |
|----------------|---------------|----------------|--|
| 1. _____ | At: _____ | to _____ Feet | Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet |
| 2. _____ | At: _____ | to _____ Feet | Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet |

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

| | | | | | |
|---|--|----------------|---------------------|----------------------|---------------------------------|
| Do NOT Write in This Space - KCC USE ONLY | Date Tested: _____ | Results: _____ | Date Plugged: _____ | Date Repaired: _____ | Date Put Back in Service: _____ |
| | Review Completed by: _____ Comments: _____ | | | | |
| TA Approved: <input type="checkbox"/> Yes <input type="checkbox"/> 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 |

PRECISION WIRELINE and TESTING
P.O. BOX 560
LIBERAL, KANSAS 67905-0560
620-629-0204

PRODUCER PRAIRY ENERGY CSG WT SET @ TD PB GL
WELL NAME SNELL #2 TBG WT SET @ SN PKR KB
LOCATION 35-22S-38W PERFS TO , TO , TO , TO
COUNTY KEARNY STATE KS PROVER METER TAPS ORIFICE PCR TCR
GG API @ GM RESERVOIR

| DATE TIME OF READING | ELAP TIME HOUR | WELLHEAD PRESSURE DATA | | | | | | MEASUREMENT DATA | | | | LIQUIDS | | TYPE TEST: <u> </u> | INITIAL <u> </u> | SPEICAL <u> </u> | ENDING <u> </u> | |
|----------------------|----------------|------------------------|----------------|----------|----------------|----------|----------------|------------------|-------|------|--------|------------|-------------|------------------------------|---------------------------|---------------------------|--|---|
| | | CSG PSIG | Δ P CSG | TBG PSIG | Δ P TBG | BHP PSIG | Δ P BHP | PRESS PSIG | DIFF. | TEMP | Q MCFD | COND BBLs. | WATER BBLs. | ANNUAL <u> </u> | RETEST <u> </u> | DATE <u>6-20-19</u> | REMARKS PERTINENT TO TEST DATA QUALITY | |
| THURSDAY | | | | | | | | | | | | | | | | | | |
| 6-20-19 | | | | | | | | | | | | | | | | | | ASSUME AVERAGE JT. LENGTH = 31.50' |
| 1230 | | 16.4 | | PUMP OFF | | | | | | | | | | | | | | CONDUCT LIQUID LEVEL DETERMINATION TEST |
| | | | | | | | | | | | | | | | | | | SHOT |
| | | | | | | | | | | | | | | | | | | JTS TO |
| | | | | | | | | | | | | | | | | | | DISTANCE |
| | | | | | | | | | | | | | | | | | | # |
| | | | | | | | | | | | | | | | | | | FLUID |
| | | | | | | | | | | | | | | | | | | TO FLUID |
| | | | | | | | | | | | | | | | | | | 1 |
| | | | | | | | | | | | | | | | | | | 75.0 |
| | | | | | | | | | | | | | | | | | | 2363' |
| | | | | | | | | | | | | | | | | | | 2 |
| | | | | | | | | | | | | | | | | | | 75.0 |
| | | | | | | | | | | | | | | | | | | 2363' |

July 09, 2019

Robert Greenberg
Prairie Energy LC
1240 GLENBROOK DR
OKLAHOMA CITY, OK 73118-1033

Re: Temporary Abandonment
API 15-093-20658-00-00
SNELL 2
SW/4 Sec.35-22S-38W
Kearny County, Kansas

Dear Robert Greenberg:

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

Shut-in Over 10 years

Pursuant to K.A.R. 82-3-111, the well must be plugged or returned to service by August 06, 2019.

If you wish to instead file an application for an exception to the 10-year limitation of K.A.R. 82-3-111, demonstrating why it is necessary to TA the well for more than 10 years, then you must file the application for an exception by August 06, 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,
Michael Maier
KCC DISTRICT 1