KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# Name: Address 1: | | | | API No. 15 | | | | | | |
|-------------------------------------|-------------------------|-----------------|-----------------|-----------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------|--------|-------|--|-----------------------|
| | | | | | | | | | | Sec Twp S. R E W |
| | | | | Address 2: | | | | | | feet from N / |
| City: | State: | Zip: | + | GBS Locati | feet from L E / L W Line of Section | | | | | |
| Contact Person: | | | | GPS Location: Lat:, Long: Datum: NAD27 NAD83 WGS84 County: Elevation: GL KB | | | | | | |
| | | | | | | | | | | Contact Person Email: |
| Field Contact Person: | | | | Well Type: (| check one) 🗌 | Dil 🗌 Gas 🗌 OG 🗌 WSW 🗌 C | Other: | | | |
| Field Contact Person Phon | | | | | | ENHR Permit | #: | | | |
| | | | | | 0 | | | | | |
| | | | | Spud Date: | | Date Shut-In: | | | | |
| | Conductor | Surfac | e l | Production | Intermedia | ate Liner | Tubing | | | |
| Size | | | | | | | | | | |
| Setting Depth | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | |
| Top of Cement | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | |
| Casing Fluid Level from Su | rface: | | How Determine | d? | | Dat | ie: | | | |
| Casing Squeeze(s): | to v | //s | acks of cement, | to | (bottom) w / | sacks of cement. Dat | te: | | | |
| Do you have a valid Oil & O | Gas Lease? 🗌 Yes | No | | | | | | | | |
| Depth and Type: Unk | in Hole at | Tools in Hole | at (| Casing Leaks: | Yes No | Depth of casing leak(s): | | | | |
| | | | | | | Port Collar: w / | | ement | | |
| | | | , | | | | | | | |
| 1 donor 1ypo | Size: Inch Set at: Feet | | | | | | | | | |
| | Plua B | | | | | | | | | |
| | Plug B | | | | | | | | | |
| Total Depth: | Plug B | | | | | | | | | |
| Total Depth: | - | n Top Formation | n Base | | Com | pletion Information | | | | |
| | Formatic | | | rforation Interval _ | | pletion Information Feet or Open Hole Interval _ | to | _Feet | | |

Submitted Electronically

| <i>Do NOT Write in This Space -</i> KCC USE ONLY | Date Tested: | Results: | Date Plugged: | Date Repaired: | Date Put Back in Service: |
|------------------------------------------------------|--------------|-----------|---------------|----------------|---------------------------|
| Review Completed by: | | Comments: | | | |
| TA Approved: 🗌 Yes 🗌 D | 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 |
| 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 <td>KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720</td> <td>Phone 620.902.6450</td> | KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720 | Phone 620.902.6450 |
| And have been been been been been been been be | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651 | Phone 785.261.6250 |



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

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

August 20, 2019

Brett Blazer BEREXCO LLC 2020 N. BRAMBLEWOOD WICHITA, KS 67206-1094

Re: Temporary Abandonment API 15-175-20956-00-01 L C BLACK I-32 SE/4 Sec.32-31S-34W Seward County, Kansas

Dear Brett Blazer:

"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 08/20/2020.

* 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 08/20/2020.

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

Very truly yours,

Michael Maier"