KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# | | | | API No. 15- | API No. 15 | | | | | |
|-------------------------------|------------------------------|-------------|---------------|----------------------|--|----------------------------|--------|-----------|--|--|
| Name: | | | | Spot Descr | Spot Description: | | | | | |
| Address 1: | | | | · | Sec Twp S. R E W | | | | | |
| Address 2: | | | | | | feet from N | | | | |
| City: | State: | Zip: | + | | GPS Location: Lat:, Long: | | | | | |
| Contact Person: | | | | | GPS Location: Lat:, Long:, (e.gxxx.xxxxx) Datum: NAD27 NAD83 WGS84 | | | | | |
| Phone:() | | | | | County: Elevation: GL KB | | | | | |
| Contact Person Email: | | | | Lease Nam | ne: | Well | #: | | | |
| Field Contact Person: | | | | Well Type: | Well Type: (check one) Oil Gas OG WSW Other: SWD Permit #: ENHR Permit #: | | | | | |
| Field Contact Person Phone: | () | | | | | | | | | |
| | () | | | Gas Sto | | | | | | |
| | | | | Spud Date: | · | Date Shut-In: | | | | |
| | Conductor | Surfa | ice | Production | Intermedia | ate Liner | Tubing | | | |
| Size | | | | | | | | | | |
| Setting Depth | | | | | | | | | | |
| Amount of Cement | | | | | | | | | | |
| Top of Cement | | | | | | | | | | |
| Bottom of Cement | | | | | | | | | | |
| Casing Fluid Level from Surfa | ace: | | How Deter | mined? | | D | ate: | | | |
| Casing Squeeze(s): | to w | / | sacks of ceme | ent, to | (bottom) w / | sacks of cement. D | ate: | | | |
| Do you have a valid Oil & Ga | s Lease? Yes | No | | | | | | | | |
| Depth and Type: 🗌 Junk in | Hole at | Tools in Ho | le at | Casing Leaks: | Yes No | Depth of casing leak(s): | | | | |
| | | | | | | Port Collar: w / | | of cement | | |
| Packer Type: | | | | | | | | | | |
| Total Depth: | Plug Back Depth: | | | Plug Back Meth | _ Plug Back Method: | | | | | |
| Geological Date: | | | | | | | | | | |
| Formation Name | Formation Top Formation Base | | | | Com | pletion Information | | | | |
| | At: | to | Feet | Perforation Interval | to | Feet or Open Hole Interval | to | Feet | | |
| 1 | | | | | | | | | | |

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: 🗌 Yes 🗌 De | enied 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 |



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

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

August 27, 2019

Robin L. Austin Rama Operating Co., Inc. P.O. Box 159 101 S MAIN ST STAFFORD, KS 67578-1429

Re: Temporary Abandonment API 15-119-21145-00-00 ADAMS 8-11 NW/4 Sec.11-35S-30W Meade County, Kansas

Dear Robin L. Austin:

"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 08/27/2020.

* 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 08/27/2020.

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

Very truly yours,

Michael Maier"