## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#                       |                                |                      |               | API No. 15                |   |                                |        |              |                   |
|--|--------------------------------|----------------------|---------------|---------------------------|---|--------------------------------|--------|--------------|-------------------|
|  |                                |                      |               |                           |   |                                |        |              | Address 1:        |
| Address 2:                               |                                |                      |               |                           |   | feet from N /                  |        |              |                   |
| City:                                    | State:                         | Zip: +               |               | GPS Location: Lat:, Long: |   |                                |        |              |                   |
| Contact Person:                          |                                |                      |               | GPS Location: Lat:        |   |                                |        |              |                   |
|  |                                |                      |               |                           |   |                                |        |              |                   |
|  |                                |                      |               | Field Contact Person:     |   |                                |        | Well Type: ( | rcheck one) 🗌 Oil |
|  |                                |                      |               |                           |   | ENHR Permit                    | #:     |              |                   |
|  | ield Contact Person Phone: ( ) |                      |               |                           | Gas Storage Permit #:  Spud Date: Date Shut-In: |                                |        |              |                   |
|  |                                |                      |               | Spud Date:                |   | Date Shut-In:                  |        |              |                   |
|  | Conductor                      | Surface              | Pro           | duction                   | Intermediate                                    | e Liner                        | Tubing |              |                   |
| Size                                     |                                |                      |               |                           |   |                                |        |              |                   |
| Setting Depth                            |                                |                      |               |                           |   |                                |        |              |                   |
| Amount of Cement                         |                                |                      |               |                           |   |                                |        |              |                   |
| Top of Cement                            |                                |                      |               |                           |   |                                |        |              |                   |
| Bottom of Cement                         |                                |                      |               |                           |   |                                |        |              |                   |
| Casing Fluid Level from Sur              | ace:                           | Hov                  | v Determined? |                           |   | Date                           | e:     |              |                   |
|  |                                |                      |               |                           |   | sacks of cement. Dat           |        |              |                   |
|  |                                |                      |               | (top)                     | (bottom)  |                                |        |              |                   |
| Do you have a valid Oil & Ga             | as Lease?                      | No                   |               |                           |   |                                |        |              |                   |
| Depth and Type: 🗌 Junk in                | Hole at                        | Tools in Hole at     | (depth) Cas   | sing Leaks:               | Yes No D  | epth of casing leak(s):        |        |              |                   |
|  |                                |                      |               |                           |   | ort Collar: w /                |        |              |                   |
| Packer Type:                             |                                |                      |               |                           |   |                                |        |              |                   |
| Total Depth:                             | Plug Ba                        | ack Depth:           | I             | Plug Back Meth            | od:   |                                |        |              |                   |
|  |                                |                      |               |                           |   |                                |        |              |                   |
| Geological Date:                         |                                |                      | 0             |                           | Comple  | etion Information              |        |              |                   |
| Ū.                                       | Formation                      | n Top Formation Base | 6             |                           |   |                                |        |              |                   |
| Geological Date:<br>Formation Name<br>1. |                                | ·                    |               | ration Interval           | to  | _ Feet or 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                          | nied 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 |

Conservation Division District Office No. 3 137 E. 21st Street Chanute, KS 66720



Phone: 620-902-6450 http://kcc.ks.gov/

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

August 28, 2019

Nina Flowers D & Z Exploration, Inc. 900 N ELM ST. PO BOX 159 ST ELMO, IL 62458-0159

Re: Temporary Abandonment API 15-003-25056-00-00 EAST HASTERT 19-EIW SW/4 Sec.13-20S-20E Anderson County, Kansas

Dear Nina Flowers:

"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 08/28/2020.

\* 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 08/28/2020.

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

Very truly yours,

Ryan Duling"