

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

TEMPORARY ABANDONMENT WELL APPLICATION

All blanks must be complete

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 \_\_\_\_\_ (depth)  Tools in Hole at \_\_\_\_\_ (depth) Casing Leaks:  Yes  No Depth of casing leak(s): \_\_\_\_\_  
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

<b>Do NOT Write in This Space - KCC USE ONLY</b>	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

CASING MECHANICAL INTEGRITY TEST

DOCKET # D-26979.c

Disposal  Enhanced Recovery:

Repressuring   
Flood   
Tertiary

Date injection started \_\_\_\_\_  
API #15 -185 -01053-00-01

SE SE SW, Sec 32, T 22 S, R 11 E/W

830 (402) Feet from South Section Line  
2970 (3059) Feet from East Section Line

Lease OCHS Well # 2  
County STAFFORD

Operator: L.D. DRILLING INC  
Name &  
Address 7 SW 26<sup>th</sup> AVE

Operator License # 6039  
Contact Person MARILYN DAVIS

GREAT BEND KS 67530-6525 Phone 620-793-3051

Max. Auth. Injection Press. 0 psi; Max. Inj. Rate 1000 bbl/d;  
 If Dual Completion - Injection above production \_\_\_\_\_ Injection below production \_\_\_\_\_

	Conductor	Surface	Production	Liner	Size	Tubing
Size		<u>8 5/8</u>	<u>5 1/2</u>			<u>2 7/8</u>
Set at		<u>206</u>	<u>3689</u>			<u>3660</u>
Cement Top		<u>0</u>	<u>3090</u>			Type <u>SEALTITE</u>
" Bottom		<u>206</u>	<u>3689</u>			
DV/Perf.						
Packer type <u>ARROW IN TENSION</u>						
Zone of injection <u>ARXKLE</u> ft. to ft. <u>3689-3815</u>						

TD (and plug back) 3815 ft. depth  
 Size 2 7/8 X 5 1/2 Set at 3660  
 Perf. or open hole OPEN HOLE

Type Mit: Pressure  Radioactive Tracer Survey  Temperature Survey

F Time: Start 11:15 Min. 15 Min. 30 Min.

I Pressures: 300 300 300 Set up 1 System Pres. during test 0  
 L Set up 2 Annular Pres. during test 300  
 D Set up 3 Fluid loss during test 0 bbls.

T Tested: Casing  or Casing - Tubing Annulus

The bottom of the tested zone is shut in with A-PACKER

Test Date 8/14/19 Using PAUL'S OILFIELDS SERVICE Company's Equipment

The operator hereby certifies that the zone between 0 feet and 3660 feet was the zone tested

Paul Rous Pumper  
Signature Title

The results were Satisfactory , Marginal , Not Satisfactory

State Agent Ken Seinfeld Title ECRS Witness: Yes  No

REMARKS: RETEST IN 5 YEARS

Origin. Conservation Div.;  KDHE/T;  Dist. Office;

Computer Update N 38.08653 402  
W 98.55681 3059

KCC Form U-7 6/84

GPS entered

SCANNED  
8/19/19

August 27, 2019

MARILYN DAVIS  
L. D. Drilling, Inc.  
7 SW 26TH AVE  
GREAT BEND, KS 67530-6525

Re: Temporary Abandonment  
API 15-185-01053-00-01  
OCHS 2  
SW/4 Sec.32-22S-11W  
Stafford County, Kansas

Dear MARILYN DAVIS:

"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"