## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#          |   |               |                        | API No. 15-        | API No. 15                      |                            |        |         |  |  |
|-----------------------------|---|---------------|------------------------|--------------------|---------------------------------|----------------------------|--------|---------|--|--|
|                             |   |               |                        | Spot Descri        |                                 |                            |        |         |  |  |
| Address 1:                  |   |               |                        | .                  | Se                              | ec Twp S. R                |        | E 🗌 W   |  |  |
| Address 2:                  |   |               |                        | -                  | feet from N / S Line of Section |                            |        |         |  |  |
| City:                       | State:                                  | Zip:          | _ +                    |                    | feet from E / W Line of Section |                            |        |         |  |  |
| Contact Person:             |   |               |                        |                    | GPS Location: Lat:              |                            |        |         |  |  |
|                             |   |               |                        |                    |                                 |                            |        |         |  |  |
|                             |   |               |                        |                    | Lease Name: Well #:             |                            |        |         |  |  |
| Field Contact Person:       |   |               |                        | Well Type: (d      | check one) 🗌                    | Oil Gas OG WSW Ot          | ner:   |         |  |  |
| Field Contact Person Phon   |   |               |                        |                    |                                 | ENHR Permit #              | :      |         |  |  |
|                             | //                                      |               |                        |                    |                                 |                            |        |         |  |  |
|                             |   |               |                        | Spud Date:         |                                 | Date Shut-In:              |        |         |  |  |
|                             | Conductor                               | Surface       |                        | Production         | Intermedi                       | ate Liner                  | Tubing | 1       |  |  |
| Size                        |   |               |                        |                    |                                 |                            |        |         |  |  |
| Setting Depth               |   |               |                        |                    |                                 |                            |        |         |  |  |
| Amount of Cement            |   |               |                        |                    |                                 |                            |        |         |  |  |
| Top of Cement               |   |               |                        |                    |                                 |                            |        |         |  |  |
| Bottom of Cement            |   |               |                        |                    |                                 |                            |        |         |  |  |
| Casing Fluid Level from Su  | rface:                                  |               | How Determine          | d?                 |                                 | Date                       | :      |         |  |  |
| Casing Squeeze(s):          | to w                                    | / sa          | cks of cement,         | to                 | (bottom) w /                    | sacks of cement. Date      | :      |         |  |  |
| Do you have a valid Oil & G | Gas Lease? 🗌 Yes                        | No            |                        |                    |                                 |                            |        |         |  |  |
| Depth and Type: Junk        | in Hole at                              | Tools in Hole | at                     | Casing Leaks:      | Yes No                          | Depth of casing leak(s):   |        |         |  |  |
|                             |   |               |                        |                    |                                 | Port Collar: w /           |        |         |  |  |
| Packer Type:                |   |               | ,                      |                    |                                 |                            |        | . comon |  |  |
| Раскег Туре:                | Size: _                                 |               | In                     | ch Set at:         |                                 | Feet                       |        |         |  |  |
| Total Depth:                | Plug B                                  | ack Depth:    |                        | Plug Back Method   | od:                             |                            |        |         |  |  |
| Geological Date:            |   |               |                        |                    |                                 |                            |        |         |  |  |
| Formation Name              | ation Name Formation Top Formation Base |               | Completion Information |                    |                                 |                            |        |         |  |  |
|                             | <b>.</b> .                              | to            | Feet Pe                | rforation Interval | to                              | Feet or Open Hole Interval | to     | Feet    |  |  |
| 1                           | At:                                     |               |                        |                    |                                 |                            |        |         |  |  |

## 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                          | 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 |

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

October 10, 2019

Jim Mietchen Kansas Oil & Gas, LLC 1513 MUSTANG DRIVE BALDWIN CITY, KS 66006-6100

Re: Temporary Abandonment API 15-103-21374-00-00 MINI-FARM 1 NW/4 Sec.23-12S-20E Leavenworth County, Kansas

Dear Jim Mietchen:

"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 10/10/2020.

\* 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 10/10/2020.

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

Very truly yours,

Levi Short"