## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License# Name: Address 1:  |                              |               |              | API No. 15-            | API No. 15                      |                             |        |          |  |  |
|--|------------------------------|---------------|--------------|------------------------|---------------------------------|-----------------------------|--------|----------|--|--|
|  |                              |               |              | Spot Descr             | Spot Description:               |                             |        |          |  |  |
|  |                              |               |              | _                      | Sec Twp S. R E [] W             |                             |        |          |  |  |
| Address 2:   |                              |               |              | _                      |                                 | feet from N /               |        |          |  |  |
| City:        State:       Zip:       +         Contact Person:        Phone:() |                              |               |              | 0001000                | feet from E / W Line of Section |                             |        |          |  |  |
|  |                              |               |              | GPS Local              | GPS Location: Lat:      , Long: |                             |        |          |  |  |
|  |                              |               |              |                        |                                 |                             |        |          |  |  |
|  |                              |               |              |                        | Lease Name: Well #:             |                             |        |          |  |  |
| Field Contact Person:  |                              |               |              | Well Type: (           | (check one) 🗌 🤇                 | Dil 🗌 Gas 🗌 OG 🗌 WSW 📃 O    | ther:  |          |  |  |
| Field Contact Person Phone   |                              |               |              |                        | SWD Permit #: ENHR Permit #:    |                             |        |          |  |  |
|  | //()                         |               |              |                        |                                 |                             |        |          |  |  |
|  |                              |               |              | Spud Date:             |                                 | Date Shut-In:               |        |          |  |  |
|  | Conductor                    | Surface       | e            | Production             | Intermedia                      | ate Liner                   | Tubing | J        |  |  |
| Size   |                              |               |              |                        |                                 |                             |        |          |  |  |
| Setting Depth  |                              |               |              |                        |                                 |                             |        |          |  |  |
| Amount of Cement   |                              |               |              |                        |                                 |                             |        |          |  |  |
| Top of Cement  |                              |               |              |                        |                                 |                             |        |          |  |  |
| Bottom of Cement   |                              |               |              |                        |                                 |                             |        |          |  |  |
| Casing Fluid Level from Sur  | rface:                       |               | How Determir | ned?                   |                                 | Date                        | e:     |          |  |  |
| 0  |                              |               |              |                        |                                 | sacks of cement. Dat        |        |          |  |  |
| Do you have a valid Oil & Ga   | as Lease? 🗌 Yes              | No            |              |                        |                                 |                             |        |          |  |  |
| Depth and Type: 🗌 Junk i   | in Hole at                   | Tools in Hole | at           | Casing Leaks:          | Yes No                          | Depth of casing leak(s):    |        |          |  |  |
|  |                              |               |              |                        |                                 |                             |        |          |  |  |
|  |                              |               |              |                        |                                 | Port Collar: w /            | Sack U | n cement |  |  |
| Packer Type:   | Size: _                      |               |              | Inch Set at:           |                                 | _ Feet                      |        |          |  |  |
| Total Depth:   | Plug B                       | ack Depth:    |              | Plug Back Meth         | od:                             |                             |        |          |  |  |
| Geological Date:   |                              |               |              |                        |                                 |                             |        |          |  |  |
|  | Formation Top Formation Base |               |              | Completion Information |                                 |                             |        |          |  |  |
| Formation Name   |                              |               | Foot F       | Perforation Interval   | to                              | Feet or Open Hole Interval_ | to     | Feet     |  |  |
| Formation Name   | At:                          | to            |              | choradon interval      |                                 |                             |        | 1 000    |  |  |

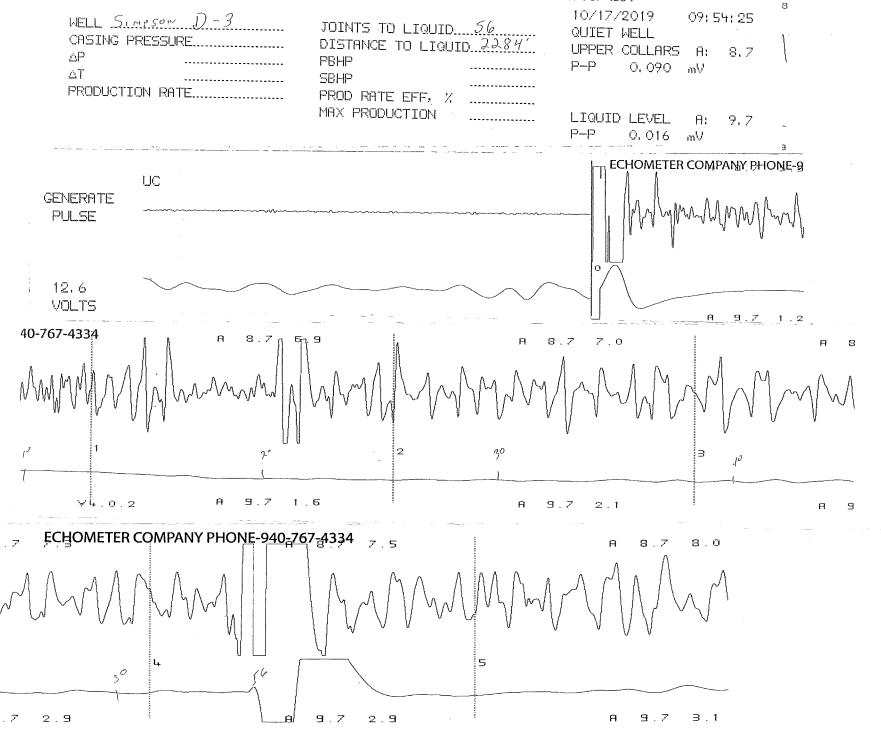
## Submitted Electronically

| 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 |







Phone: 785-261-6250 Fax: 785-625-0564 http://kcc.ks.gov/

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

October 22, 2019

Manda Weien Venture Resources, Inc. PO BOX 101234 DENVER, CO 80250-1234

Re: Temporary Abandonment API 15-051-23047-00-00 SIMPON D 3 NE/4 Sec.09-11S-17W Ellis County, Kansas

Dear Manda Weien:

"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 10/22/2020.

\* 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 10/22/2020.

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

Very truly yours,

**RICHARD WILLIAMS "**