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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

July 2017
Form must be Typed
Form must be signed
All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#                           |   |   |                     | API No. 15-            |                                 |                             |                                  |  |                       |           |         |     |          |              |       |          |  |
|--|---|---|---------------------|------------------------|---------------------------------|-----------------------------|----------------------------------|--|-----------------------|-----------|---------|-----|----------|--------------|-------|----------|--|
| Name:  |   |   |                     | Spot Description:      |                                 |                             |                                  |  |                       |           |         |     |          |              |       |          |  |
| Address 1:                                   |   |   |                     |                        |                                 |                             | _ S. R                           |  |                       |           |         |     |          |              |       |          |  |
|  |   |   |                     |                        |                                 |                             | N / S Line of Section            |  |                       |           |         |     |          |              |       |          |  |
| Address 2:                                   |   |   |                     |                        |                                 |                             |                                  |  |                       |           |         |     |          |              |       |          |  |
|  |   |   |                     |                        |                                 |                             |                                  |  | Field Contact Person: |           |         |     |          |              |       |          |  |
|  |   |   |                     |                        |                                 |                             |                                  |  |                       | Conductor | Surface | Pro | oduction | Intermediate | Liner | Tubing   |  |
|  |   |   |                     |                        |                                 |                             |                                  |  | Size                  | Conductor | Curiado |     | Sauction | momodate     | Linoi | Tability |  |
|  |   |   |                     |                        |                                 |                             |                                  |  | Setting Depth         |           |         |     |          |              |       |          |  |
| Amount of Cement                             |   |   |                     |                        |                                 |                             |                                  |  |                       |           |         |     |          |              |       |          |  |
| Top of Cement                                |   |   |                     |                        |                                 |                             |                                  |  |                       |           |         |     |          |              |       |          |  |
| Bottom of Cement                             |   |   |                     |                        |                                 |                             |                                  |  |                       |           |         |     |          |              |       |          |  |
| Do you have a valid Oil & G  Depth and Type: | in Hole at [depth]  I Depth Size:       | No Tools in Hole at  f: DV Tool:(depth) | Ca<br>w / _<br>Inch | sing Leaks: sacks      | Yes No Depth s of cement Port C | of casing leak(s): _ ollar: | ent. Date:<br>_ w / sack of ceme |  |                       |           |         |     |          |              |       |          |  |
| Total Depth:                                 | Plug Ba                                 | іск Deptn:                              |                     | Plug Back Meth         | oa:                             |                             |                                  |  |                       |           |         |     |          |              |       |          |  |
| Geological Date:                             |   |   |                     |                        |                                 |                             |                                  |  |                       |           |         |     |          |              |       |          |  |
| Formation Name                               | ation Name Formation Top Formation Base |   |                     | Completion Information |                                 |                             |                                  |  |                       |           |         |     |          |              |       |          |  |
| 1  | At:                                     | to Feet                                 | Perfo               | ration Interval        | to Fe                           | et or Open Hole In          | terval to Fee                    |  |                       |           |         |     |          |              |       |          |  |
| 2  | At:                                     | to Feet                                 | Perfo               | ration Interval -      | to Fe                           | et or Open Hole In          | iterval toFee                    |  |                       |           |         |     |          |              |       |          |  |
| INDER REMAITY OF REE                         | D IIIDV I UEDEDV ATTI                   | _                                       |                     | ctronically            |                                 | DDECT TO THE DI             | ECT OF MV KNOW! EDGE             |  |                       |           |         |     |          |              |       |          |  |
| Do NOT Write in This<br>Space - KCC USE ONLY |   |   | esults:             |                        | Date Plugged:                   | Date Repaired:              | Date Put Back in Service:        |  |                       |           |         |     |          |              |       |          |  |
| Review Completed by:                         |   |   | Comn                | nents:                 |                                 |                             |                                  |  |                       |           |         |     |          |              |       |          |  |
| TA Approved: Yes                             | Denied Date:                            |   |                     |                        |                                 |                             | <del></del>                      |  |                       |           |         |     |          |              |       |          |  |
|  |   |   |                     |                        |                                 |                             |                                  |  |                       |           |         |     |          |              |       |          |  |

## Mail to the Appropriate KCC Conservation Office:

| Name have been now toke on and from burger und were born   | KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801               | Phone 620.682.7933 |
|--|--|--------------------|
| 100 100 100 100 100 100 100 100 100 100  | KCC District Office #2 - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226 | Phone 316.337.7400 |
| The second of th | KCC District Office #3 - 137 E. 21st St., Chanute, KS 66720                            | Phone 620.902.6450 |
| Size State S | KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651                      | Phone 785.261.6250 |

Conservation Division District Office No. 1 210 E. Frontview, Suite A Dodge City, KS 67801



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

Laura Kelly, Governor

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

November 05, 2019

Neal Hensley Prairie Gas Operating, LLC 114 E. 5TH ST., SUITE 100 PO BOX 2170 TULSA, OK 74101-2170

Re: Temporary Abandonment API 15-071-20085-00-00 BARR 1 SW/4 Sec.16-17S-40W Greeley County, Kansas

## Dear Neal Hensley:

"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 11/05/2020.

- \* 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 11/05/2020.

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

Very truly yours,

Michael Maier"