## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form must be signed

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#   |                              |               |               | API No. 1              | API No. 15               |                            |        |           |  |
|--|------------------------------|---------------|---------------|------------------------|--------------------------|----------------------------|--------|-----------|--|
| Name:  |                              |               |               | Spot Des               | Spot Description:        |                            |        |           |  |
| Address 1:   |                              |               |               |                        | Sec Twp S. R E W         |                            |        |           |  |
| Address 2:   |                              |               |               |                        |                          | feet from N                |        |           |  |
| City:        State:       Zip:       +          Contact Person:         Phone:() |                              |               |               |                        |                          |                            |        |           |  |
|  |                              |               |               |                        |                          |                            |        |           |  |
|  |                              |               |               | -                      | County: Elevation: GL KB |                            |        |           |  |
| Contact Person Email:  |                              |               |               | Lease Na               | me:                      | Well                       | #:     |           |  |
| Field Contact Person:  |                              |               |               |                        |                          | Oil Gas OG WSW             |        |           |  |
| Field Contact Person Phone: ( _  | )                            |               |               |                        |                          | ENHR Perm                  | t #:   |           |  |
| Υ.   | ,                            |               |               | Gas S<br>Spud Date     |                          | Date Shut-In:              |        |           |  |
|  |                              |               |               |                        |                          |                            |        |           |  |
|  | Conductor                    | Surfac        | e             | Production             | Intermed                 | late Liner                 | Tubing | J         |  |
| Size   |                              |               |               |                        |                          |                            |        |           |  |
| Setting Depth Amount of Cement   |                              |               |               |                        |                          |                            |        |           |  |
| Top of Cement  |                              |               |               |                        |                          |                            |        |           |  |
| Bottom of Cement   |                              |               |               |                        |                          |                            |        |           |  |
|  |                              |               |               |                        |                          |                            |        |           |  |
|  |                              |               |               |                        |                          | Da                         |        |           |  |
| Casing Squeeze(s):   | _ to w                       | / s           | acks of cemer | nt, to                 | w /                      | sacks of cement. Da        | ate:   |           |  |
| Do you have a valid Oil & Gas L  | Lease? Yes                   | No            |               |                        |                          |                            |        |           |  |
| Depth and Type:  | lole at                      | Tools in Hole | at            | Casing Leaks:          | Yes No                   | Depth of casing leak(s).   |        |           |  |
|  |                              |               |               |                        |                          | Depth of casing leak(s):   |        |           |  |
|  |                              |               |               |                        |                          | Port Collar: w /           | sack o | of cement |  |
| Packer Type:   | Size: _                      |               |               | _ Inch Set at:         |                          | Feet                       |        |           |  |
| Total Depth:   | Plug Ba                      | ack Depth:    |               | Plug Back Me           | thod:                    |                            |        |           |  |
| Geological Date:   |                              |               |               |                        |                          |                            |        |           |  |
| Formation Name   | Formation Top Formation Base |               |               | Completion Information |                          |                            |        |           |  |
| 1  | At:                          | to            | Feet          | Perforation Interva    | II to                    | Feet or Open Hole Interval | to     | Feet      |  |
|  |                              | to            | Foot          | <b>D</b> ( ) ( ) (     | 4                        | Feet or Open Hole Interval |        | Faat      |  |

## Submitted Electronically

| <i>Do NOT Write in This<br/>Space -</i> KCC USE ONLY | Date Tested: | Results:  | Date Plugged: | Date Repaired: | Date Put Back in Service: |
|--|--------------|-----------|---------------|----------------|---------------------------|
| Review Completed by:                                 |              | Comments: |               |                |                           |
| TA Approved: 🗌 Yes 🗌 D                               | enied Date:  |           |               |                |                           |

## Mail to the Appropriate KCC Conservation Office:

| $\begin{array}{ c c c c c c c c c c c c c c c c c c c$ | 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

November 14, 2019

Mike Colvin JRC Oil Co., Inc. PO BOX 426 GARNETT, KS 66032-0426

Re: Temporary Abandonment API 15-003-26160-00-00 DANIEL DK-13 NW/4 Sec.04-21S-21E Anderson County, Kansas

Dear Mike Colvin:

"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 11/14/2020.

\* 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 11/14/2020.

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

Very truly yours,

Dallas Logan"