KOLAR Document ID: 1483237

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

Form must be Typed

TEMPORARY ABANDONMENT WELL APPLICATION

Form must be signed All blanks must be complete 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 ______ State: _____ Zip: _____ + __ _ _ _ _ _____ , Long: _____ (e.g. xx.xxxxx) Datum: NAD27 NAD83 WGS84 _____ Elevation: ____ GL KB __ Well #: __ Lease Name: ___ Well Type: (check one) Oil Gas OG WSW Other: Gas Storage Permit #:____ Spud Date: ___ ___ Date Shut-In: __ Tubing Production Intermediate Liner ___ How Determined? ____ Casing Squeeze(s): _____ to ____ w / ____ sacks of cement, ____ to ____ w / ____ sacks of cement. Date: ___ Depth and Type:

Junk in Hole at _____ Tools in Hole at ____ Casing Leaks: Yes No Depth of casing leak(s): _____ (depth) (depth)

Type Completion: ALT. I Depth of: DV Tool: _____w / _____ sacks of cement Port Collar: ____w / ____ sack of cement _ Inch Set at: ___ ___ Plug Back Method: ___ Completion Information

Formation Name Formation Top Formation Base ___ At: _____ to ____ Feet Perforation Interval ____ ____to_____ Feet or Open Hole Interval _____ to _____ Feet At: _____ to ____ Feet Perforation Interval _____ to ____ Feet or Open Hole Interval ____

HINDED DENALTY OF DED HIDV I DEDEDY ATTECT THAT THE INFORMATION CONTAINED REDEIN ICTORE AND CODDECT TO THE DECT OF MY VINOMI EDGE

Submitted Electronically

Do NOT Write in This 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:



OPERATOR: License# _____

Contact Person Email: _____

Field Contact Person Phone: (_____) ____

Conductor

__ Size: ___

__ Plug Back Depth: ___

Surface

Address 1:

Address 2:

Size

Setting Depth Amount of Cement Top of Cement **Bottom of Cement**

Packer Type: ___ Total Depth: ___

Geological Date:

Casing Fluid Level from Surface: ____

Do you have a valid Oil & Gas Lease? Yes No

Phone:(_____) __

Field Contact Person: ____

	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/

Laura Kelly, Governor

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

November 27, 2019

Tracy Miller Cherokee Wells LLC P.O. BOX 296 FREDONIA, KS 66736-0296

Re: Temporary Abandonment API 15-205-27055-00-00 ROW A-1 SE/4 Sec.20-28S-15E Wilson County, Kansas

Dear Tracy Miller:

"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 11/27/2020.

- * 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 11/27/2020.

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

Very truly yours,

Dallas Logan"