TEMPORARY ABANDONME

OPERATOR: License# _____

Address 1:_____ Address 2:

Name: ___

| VATION L | DIVISION | | Form must be Typed |
|-------------|-----------------------------|---------------|---|
| NT W | ELL APPLICA | TION AII | Form must be signed blanks must be complete |
| API No. 15- | | | |
| Spot Descr | iption: | | |
| | · Sec | feet from N / | S Line of Section |
| | on: Lat: | | |
| Datum: | (e.g. xx.xxxxx) NAD27 NAD83 | WGS84 | (e.gxxx.xxxxx) |
| County: | Elev | ation: | GL KB |
| Lease Nam | e: | Well # | |
| SWD P | /check one) | ENHR Permit | |
| | | | |
| tion | Intermediate | Liner | Tubing |
| | | | |

| City: | State: | _ Zip: + | | GPS Location | on: Lat: | , Long: | | | |
|-------------------------------|-------------------|---------------------|------------|------------------------------|-----------------------|-----------------------|-------------|--------------|--------|
| Contact Person: | | | | | (e.g. xx. NAD27 NAD83 | WGS84 | (e.g. | xxx.xxxxx) | |
| Phone:() | | | | | | Elevation: | | | |
| Contact Person Email: | | | | Lease Name | e: | | _ Well #: | | |
| Field Contact Person: | | | | | | Gas OG W | | | |
| Field Contact Person Phone: | () | | | SWD Permit #: ENHR Permit #: | | | | | |
| | , | | | Gas Sto | rage Permit #: | Date Shut- | .ln· | | |
| <u> </u> | | T | 1 | Opud Date. | | Date Ollut | | | |
| | Conductor | Surface | Pro | oduction | Intermediate | Liner | | Tubing | |
| Size | | | | | | | | | |
| Setting Depth | | | | | | | | | |
| Amount of Cement | | | | | | | | | |
| Top of Cement | | | | | | | | | |
| Bottom of Cement | | | | | | | | | |
| Casing Fluid Level from Surfa | ice: | How D | etermined? | , | | | Date: _ | | |
| Casing Squeeze(s): | | | | | | | | | |
| (top) | (bottom) | · | | (top) | (bottom) | | | | |
| Do you have a valid Oil & Gas | s Lease? | No | | | | | | | |
| Depth and Type: | Hole at | Tools in Hole at | Ca | asing Leaks: | Yes No Dep | th of casing leak(s): | | | |
| Type Completion: ALT. I | | | | | | | | | cement |
| Packer Type: | | | | | | | | | |
| | | | | | | | | | |
| Total Depth: | Plug Ba | ick Depth: | | Plug Back Metho | od: | | | | |
| Geological Date: | | | | | | | | | |
| Formation Name | Formation | Top Formation Base | | | Completion | on Information | | | |
| 1 | At: | to Fee | et Perfo | oration Interval _ | to I | Feet or Open Hole | Interval | to | Feet |
| | | to Fee | | | | Feet or Open Hole | | | |
| | | | | , and | | 00t 0. Opo | 1110. 12. — | | |
| HINDED DENIALTY OF DED I | IIBV I LEBEBY ATT | ECT TUAT THE INCODE | ATION CO | NITAINED LIED | EIN ICTOLIE AND / | CORRECT TO THE | DEST OF MV | KNOW! EL | 30E |
| | | Submit | ted Fle | ctronically | M. | | | | |
| | | Odbiiii | | ,ou or noan, | y | | | | |
| | | | | | | | | | |
| Do NOT Write in This | Date Tested: | 1 | Results: | | Date Plugged: | Date Repaired: | Date Put B | ack in Servi | ce: |
| Space - KCC USE ONLY | | _ | | | | | | | |
| Pavious Completed by: | | | Comr | monto: | | | | | |
| Review Completed by: | | | Comi | nents: | | | | | — |

| 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 C | Denied 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 |

February PHONE ECHOMETER COMPANY PHONE ECHOMETER COMPANY PHONE-940-767-4334 I for from the fill that the loss from the form of the fill of the form of the

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

December 30, 2019

Tom Kaetzer RedBud Oil & Gas Operating, LLC 16000 STUEBNER AIRLINE RD SUITE 320 SPRING, TX 77379

Re: Temporary Abandonment API 15-205-25664-00-00 KEBERT TRUST C2-35 SW/4 Sec.35-29S-15E Wilson County, Kansas

Dear Tom Kaetzer:

- "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 12/30/2020.
- * 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 12/30/2020.

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

Very truly yours,

Dallas Logan"