## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

All blanks must be complete

## TEMPORARY ABANDONMENT WELL APPLICATION

| OPERATOR: License#              |                              |             |           |                        | API No. 15  |                   |              |                       |          |        |        |
|---------------------------------|------------------------------|-------------|-----------|------------------------|---|-------------------|--------------|-----------------------|----------|--------|--------|
|                                 |                              |             |           |                        |   |                   |              |                       |          |        |        |
| Address 1:                      |                              |             |           |                        |   | Se                | ec           | Twp S. R              | l        | 🗌 E    | : 🗌 W  |
| Address 2:                      |                              |             |           |                        |   |                   |              | feet from N           |          |        |        |
| City:                           | State:                       | Zip:        | +         |                        | feet from L E / L W Line of Section                               |                   |              |                       |          |        |        |
| Contact Person:                 |                              |             |           |                        | GPS Location: Lat:, Long:, e.gxxx.xxxxx) Datum: NAD27 NAD83 WGS84 |                   |              |                       |          |        |        |
| Phone:( )                       |                              |             |           |                        |   |                   |              | n:                    |          | GL     | КВ     |
| Contact Person Email:           |                              |             |           |                        | Lease Nam   | e:                |              | Well                  | #:       |        |        |
| Field Contact Person:           |                              |             |           |                        | Well Type: (  | check one) 🗌      | Oil Gas      | ]og 🗌 wsw 🗌           | Other: _ |        |        |
| Field Contact Person Phone: (   | )                            |             |           |                        |   |                   |              | ENHR Perm             | it #:    |        |        |
| (                               | ,                            |             |           |                        |   | orage Permit #: _ |              |                       |          |        |        |
|                                 |                              |             |           |                        | Spud Date:  |                   |              | Date Shut-In:         |          |        |        |
|                                 | Conductor                    | Surfa       | ace       | Pro                    | duction   | Intermedia        | ate          | Liner                 |          | Tubing |        |
| Size                            |                              |             |           |                        |   |                   |              |                       |          |        |        |
| Setting Depth                   |                              |             |           |                        |   |                   |              |                       |          |        |        |
| Amount of Cement                |                              |             |           |                        |   |                   |              |                       |          |        |        |
| Top of Cement                   |                              |             |           |                        |   |                   |              |                       |          |        |        |
| Bottom of Cement                |                              |             |           |                        |   |                   |              |                       |          |        |        |
| Casing Fluid Level from Surface | :                            |             | How Deter | rmined?                |   |                   |              | Da                    | ate:     |        |        |
| Casing Squeeze(s):              |                              |             |           |                        |   |                   |              |                       | ate:     |        |        |
| Do you have a valid Oil & Gas L | ease? Yes                    | No          |           |                        |   |                   |              |                       |          |        |        |
| Depth and Type: 🗌 Junk in Ho    | ole at                       | Tools in Ho | le at     | Cas                    | ing Leaks:  | Yes No            | Depth of cas | ing leak(s):          |          |        |        |
| Type Completion: ALT. I         | ,                            |             |           |                        |   |                   |              |                       |          |        | cement |
| Packer Type:                    |                              |             | ,         |                        |   |                   |              | (depth)               |          |        |        |
|                                 |                              |             |           |                        |   |                   |              |                       |          |        |        |
| Total Depth:                    | Plug I                       | Back Depth: |           | F                      | lug Back Meth   | od:               |              |                       |          |        |        |
| Geological Date:                |                              |             |           |                        |   |                   |              |                       |          |        |        |
|                                 | Formation Top Formation Base |             |           | Completion Information |   |                   |              |                       |          |        |        |
| Formation Name                  | 1 onnau                      |             | _         | <b>D</b> (             | ation Intorval  | to                | Feet or      | Open Hole Interval    |          | to     | Feet   |
| Formation Name                  |                              | to          | Feet      | Perfor                 |   |                   |              | Open i lole intel val |          | 10     |        |

## 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 D                           | enied Date:  |           |               |                |                           |

## Mail to the Appropriate KCC Conservation Office:

| NUM         NUM <th>KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801</th> <th>Phone 620.682.7933</th> | 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. 2 3450 N. Rock Road Building 600, Suite 601 Wichita, KS 67226



Phone: 316-337-7400 Fax: 316-630-4005 http://kcc.ks.gov/

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

April 23, 2020

Mike Kiser Kiser, Michael dba MWK Petroleum Co. 508 STONE LAKE CT AUGUSTA, KS 67010-2399

Re: Temporary Abandonment API 15-015-20221-00-01 JENKINSON A OWWO 1(2B) NE/4 Sec.27-27S-05E Butler County, Kansas

Dear Mike Kiser:

"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 04/23/2021.

\* 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 04/23/2021.

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

Very truly yours,

Duane Krueger"